At Devereux Florida, we welcome the opportunity to work with youth referred to us throughout the country and even outside of the United States. We have had the privilege to make a meaningful impact to the lives of hundreds of youth over the course of the last 25 years in Florida and over 100 years at Devereux nationally.

In order to create a setting designed to help your child succeed, we have a very structured program. As your child grows in our program, he or she earns greater privileges and less limitation. This growth should be evident in all aspects of your child’s life including school, family, peer relationships and more. After successfully completing the treatment program, your child will be able to leave Devereux and either return home or to less restrictive living.

We understand and recognize the challenges presented when a child is participating in a program that is a great distance from their family and home community. For this reason, we strive to provide support in any way possible to overcome some of these challenges.

More than likely you have many questions running through your head right now. We’ve created this guide to help answer some of them. We want you to be well-informed and we encourage you to ask questions whenever you have them.

Devereux wants very much to involve family members and guardians in their child’s treatment. For the benefit of both child and family, we invite you to participate in family therapy sessions that will be arranged by your child’s therapist. Every effort will be made to schedule therapy and visits at dates and times convenient for everyone involved.

Recognizing how important families and guardians are to children, we value your positive relationship with your child and like to see visits go well. For this reason, we ask for your support with the visitation rules.

- Upon arrival at Devereux, please sign in at the front desk.
- Schedule your visit(s) in advance. Advance scheduling gives the Therapist/Behavior Analyst a chance to make plans with the residential living unit so that your visit will run as smooth as possible.

Please do not hesitate to contact us. You’ll find helpful phone numbers throughout this booklet and a list of important numbers located on the second page.
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Immunizations Addendum
Dear Parent/Guardian,

When calling Devereux for information about your child, please remember to reference your child’s medical records number (MR#) at the onset of your telephone call. To ensure each individual’s confidentiality, staff will not give out any information unless you can provide them with your child’s medical records number!

RE: ___________________________          MR#: ____________

Devereux Viera Campus phone number is 1.800.Devereux (1.800.338.3738).

Your child was admitted to the Residential Treatment Unit _________________________
ext. ______

Your primary contact is case coordinator ___________________________ ext. ______

The program director for your child’s program is ______________________ ext. ______

The program coordinator ___________________________ ext. ______
The program coordinator can provide you with day-to-day information of activities on your child’s assigned residential housing unit and is also responsible for 24 hour administrative care on the unit.

Treatment professionals on your child’s team:

Your child’s attending psychiatrist is ___________________________. He/she can be reached at ext. __________. The psychiatrist can provide you with the medical information and answer any questions you may have regarding medication treatment.

The unit nurse can address all nursing issues. Call ext. __________ and ask for the unit nurse.

Your child’s behavior analyst is ___________________________ ext. ______

The behavior analyst supervisor is ___________________________ ext. ______

Your child’s therapist is ___________________________ ext. ______

The therapist supervisor is ___________________________ ext. ______
The therapist can provide you with the clinical information on how your child is progressing.
**Finance Department**
A patient accounts specialist is on-site at the Viera Campus to assist you with any questions or information pertaining to billing or your child’s account balance. The patient account specialist can be reached at ext. 77589.

**Medical Records**
Devereux Florida Viera Campus maintains a complete patient record of care and treatment for each individual. Medical records are confidential and copies are released only with written authorization from the patient, parent and/or legal guardian. For assistance obtaining medical records, please dial ext. 77558.

**Devereux School**
The Devereux School located at the Viera Campus is a K-12 accredited school. For more information regarding the Devereux School, please reference the Devereux School section in this handbook. If you would like to know how your child is doing in school, speak to his/her teacher, and/or to obtain school records, please contact the Devereux School Administrative Office at ext. 77400.

**Outgoing & Incoming Calls**
Your child or adolescent is permitted to make (2) direct phone calls a week on his/her assigned phone days. Calls are requested to be limited to fifteen (15) minutes each unless other arrangements have been made. Children and adolescents may not receive incoming phone calls without prior arrangement, except in emergencies.

**Individual Phone Arrangements**
If conveyed by the parent or guardian and if it is therapeutically indicated, phone contacts may vary according to the individual's needs. This is agreed upon by the therapist, individual and parent/guardian. If the parent/guardian would like additional phone contact, arrangements can be made. For more information, please reference the Support & Other Services section in this handbook.

**General Questions and/or Concerns**
If you would like additional information or have any concerns, please call the Viera Campus Administrative Office at 1.800.338.3738.
At Devereux Florida, we welcome the opportunity to work with youth referred to us throughout the country and even outside of the United States. We have had the privilege to make a meaningful impact to the lives of hundreds of youth over the course of the last 25 years in Florida and over 100 years at Devereux nationally.

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We understand and recognize the challenges presented when a child is participating in a program that is a great distance from their family and home community. For this reason, we strive to provide support in any way possible to overcome some of these challenges.

More than likely you have many questions running through your head right now. We’ve created this guide to help answer some of them. We want you to be well-informed and we encourage you to ask questions whenever you have them.

Devereux wants very much to involve family members and guardians in their child’s treatment. For the benefit of both child and family, we invite you to participate in family therapy sessions that will be arranged by your child’s therapist. Every effort will be made to schedule therapy and visits at dates and times convenient for everyone involved.

Recognizing how important families and guardians are to children, we value your positive relationship with your child and like to see visits go well. For this reason, we ask for your support with the visitation rules.

- Upon arrival at Devereux, please sign in at the front desk.
- Schedule your visit(s) in advance. Advance scheduling gives the Therapist/Behavior Analyst a chance to make plans with the residential living unit so that your visit will run as smooth as possible.

Please do not hesitate to contact us. You’ll find helpful phone numbers throughout this booklet and a list of important numbers located on the second page.
Our Mission
Devereux changes lives and nurtures human potential. We inspire hope, ensure well-being and promote meaningful life choices. Our mission is achieved through a wide range of services and supports for individuals and their families.

Purpose
For over 100 years, Devereux has helped persons with emotional, behavioral and intellectual/developmental disabilities transition from troubled lives to lives filled with personal accomplishment and hope. At Devereux, we dream of new tomorrows and realities for the individuals we serve. We know that every person, regardless of disability, has the potential and the right to lead a life of fulfillment and accomplishment.

Core Values
We support a respectful and integrated team approach
We foster personal and professional growth of our staff
We develop innovative and effective solutions
We partner with families and communities

Our Promise
To provide consistently high quality programs, services and resources in safe and supportive environments that enrich and empower individuals and communities, and provide support to help them be the best they can be. These services are offered to individuals regardless of race, sex, creed or religious beliefs.
Devereux has put forth much research and effort in creating a foundation-wide Philosophy of Care. It is composed of general guidelines that all Devereux programs share. The Philosophy of Care focuses on three major principles:

- **Individualized Treatment**
  All services will be based on solid individualized assessments which establish treatment objectives and goals for each unique person and family.

- **Accountable and Effective Strategies**
  Services will be aligned with specific, evidenced-based practices that have been thoroughly researched and proven. Strategies will be continuously evaluated and when necessary, changed.

- **Positive, Strengths-Based Approaches**
  Treatment will focus on strengthening individualized skills, relationship development, individual strengths and proactive intervention through the use of teaching, modeling and strong systems of rewards.

This state-of-the-art clinical approach increases Devereux’s ability to effectively measure and evaluate the efficacy of treatment. The Devereux Philosophy of Care results in stronger outcomes, shorter lengths of stay and life-long skills that our clients will utilize to become independent and successful throughout their lives.
Non-discrimination in Treatment Services

All activities of the Devereux Foundation with regard to referral, admission, placement of individuals, communication and the provision of services shall be conducted without regard to race, color, religious creed, ancestry, national origin, gender or sexual orientation.

Program services shall be made accessible to eligible persons with disabilities through the most practical, clinically appropriate and economically feasible methods available. These methods include, but are not limited to, structural modifications, adaptive equipment, the provision of aides and the use of alternate service delivery.
Devereux Florida Viera Campus supports the concept that each patient is an individual and is respected as a person. Each patient has the right to comprehensive, compassionate, family-centered care that will be provided by an interdisciplinary team and directed by the physician and/or therapist. We utilize an approach that provides sensitive and flexible care that respects the developmental, psychological, emotional and social needs of patients and their families.

As part of our commitment to the needs of our young patients, the Devereux Florida Children's Bill of Rights is prominently displayed - and followed - throughout our campus.

Yes, You Have the Right:

- To be respected at all times.
- To dignity, privacy and humane care.
- To be involved in your treatment.
- To know what kind of medication you may be taking and to understand what the medication is for – and to receive prompt and appropriate medical care.
- To communicate by phone, mail or visitation within the reasonable rules of this program.
- To have clothes and personal items, unless they are removed for safety or medical reasons.
- Not to participate in experimental research.
- To have your clinical record kept confidential at this program.
- To have information communicated to you (verbally and written) in your native language.
- To call the ABUSE HOTLINE at 1-800-962-2873 if you feel any staff person here has threatened you, hit you or asked you to do anything sexual; the Human Rights Advocacy Committee (1-800-342-0825) and/or the Disability Rights Florida (1-800-342-0823). You should always report anything that really bothers you to the program director or your therapist.
- To quick responses to questions.
- To know who is treating you.
- To know the rules and regulations of your program.
- To report any complaint you may have regarding these rights by using the grievance procedure.
- To contact the Joint Commission’s Office of Quality Monitoring to report any unresolved concerns or register a complaint call, 1-800-994-6610 or e-mail complaint@jointcommission.org.
**The Viera Campus**

The Devereux Florida Viera Campus offers a professional therapeutic environment for children and adolescents facing significant emotional, behavioral and intellectual/developmental challenges. Located in Brevard County, in the town of Viera just 45 minutes east of the Orlando International Airport and west of the Melbourne International Airport. Our beautiful 55 acre campus offers a serene setting with tropical landscaping, lakefront views, a swimming pool, volleyball court and playground - all in a climate suitable to enjoy plenty of outdoor activities.

The campus offers two residential programs: The Intensive Residential Treatment Center (IRTC) and the Intellectual/Developmental Disabilities (I/DD) Program. Through these residential treatment programs, the Viera Campus includes a total of six residential units and the Devereux School, accredited by AdvancED™.

**Devereux Florida Viera Campus provides the following:**

- Child and Adolescent Specialty Hospital
- Intensive Residential Treatment Center (IRTC)
- Intellectual/Developmental Disabilities Program (I/DD)
- Commercial Sexual Exploitation of Children Program*
- Dual Diagnosis Treatment Program
- Diabetes Management Program *
- Educational and Vocational Services
- Psychiatric Services
- Individual Therapy
- Group Therapy
- 24/7 Nursing
- Applied Behavior Analysis
- Pediatric Endocrinologist *
- Substance Abuse Treatment Program *
- Comprehensive Assessment Program *
- Speech Therapy*
- Occupational & Physical Therapy *
- Life Skills Training
- Community Inclusion Opportunity *
- Bilingual Staff
- Locked and Unlocked Housing Units
- Accredited by the Joint Commission
- Accredited by AdvancED™

* When applicable or appropriate for client.
Intensive Residential Treatment Center (IRTC)

The Intensive Residential Treatment Center (IRTC) at the Devereux Florida Viera Campus provides services for children and adolescents between the ages of 5 to 19. Our highly experienced multidisciplinary team helps clients diagnosed with affective disorders, psychosis, history of abuse and neglect, emotional and psychiatric difficulties.

The Viera Campus IRTC Program offers three separate residential housing units; each a secure setting for the treatment of severely emotionally, behaviorally and psychiatrically troubled youth as well as youth with co-occurring mental health and substance use disorders.

The treatment model of the IRTC is based on the Positive Behavior Intervention and Supports (PBIS) curriculum, emphasizing the importance of providing individuals with options to make positive choices. PBIS in addition with Devereux’s unique training methods provide children and adolescents ample opportunities to develop their own strengths and learn how to manage one’s own behavior. Multidisciplinary teams led by the psychiatrist, therapist and behavior analyst work in collaboration to support positive change.

We believe that through the use of the PBIS methodology, our clinicians and paraprofessional staff will be able to treat children and adolescents more effectively and efficiently while returning them to their respective communities more quickly. Further, we are able to provide children and adolescents with an enhanced skill set which will enable improved coping skills and reduced recidivism.

At the heart of Devereux’s philosophy is a multidisciplinary approach to treatment, providing patients with extraordinary attention based on their individual diagnosis and medical needs. The term “multidisciplinary” is used frequently today in describing the ideal care for patients. It simply means that a patient can obtain the opinion of a team of medical specialist working together to provide individualized diagnoses, assessments and treatment options.

We have multiple specialists in each discipline. A common multidisciplinary team includes behavior analysts, specialized therapists, educators, medical staff (including 24 hour nursing and supervision, two full time on-site psychiatrists, a neuropsychologist as well as a pediatric physician and endocrinologist) and direct care professionals. All strive to provide an integrative approach to teaching, modeling and reinforcing appropriate behavior in the milieu and community to maximize generalization, post discharge.
We aspire to provide a positive and affirmative environment which is nurturing yet structured; while creating opportunities for successful experiences. Helping our patients learn to trust and develop healthy relationships while resolving problematic behaviors is our goal. Ultimately each individual will adapt these new skills to reintegrate into their home community.
Intellectual/Developmental Disabilities (I/DD) Program

The Intellectual and Developmental Disabilities (I/DD) Program provides services for individuals between the ages of 5 and 19. This program provides services for individuals who have the existence of both intellectual/developmental disabilities and mental illness. In addition to being identified with an intellectual/developmental disability or Autism Spectrum Disorder, the individuals also have been diagnosed with a psychiatric disorder as identified on Axis I. Individuals typically display a wide range of challenging behaviors including aggression, property destruction, severe tantrum behavior, self-injurious behavior, run away problems and difficulty following directions reliably. The individuals admitted to the program display clear deficits in adaptive and social functioning.

The I/DD Program is aimed at providing children and adolescents with the supports, training and skills essential in attaining a successful discharge into a less restrictive setting. Treatment focuses on increasing independence in all settings using positive approaches. The program attempts to create real world experiences in a structured setting to maximize teachable moments. Our I/DD Program offers small staff to patient ratio (1:4) for the best treatment outcome.

We believe that each child and adolescent must be treated as an individual and treatment must reflect their individual characteristics and interests. Our Individual Plan of Care outlines how the treatment team will build upon the individual’s identified strengths during treatment. Additionally, it assesses the skills they must learn to function in a less restrictive setting in addition to addressing the challenging behaviors preventing him or her from returning home or to a less restrictive community setting.

At the heart of Devereux’s philosophy is a multidisciplinary approach to treatment, providing patients with extraordinary attention based on their individual diagnosis and medical needs. The term “multidisciplinary” is used frequently today in describing the ideal care for patients. It simply means that a patient can obtain the opinion of a team of medical specialist working together to provide individualized diagnoses, assessments and treatment options.

A common multidisciplinary team includes behavior analysts, specialized therapists, medical staff (including 24 hour nursing and supervision, two full time on-site psychiatrists, a neuropsychologist as well as a pediatric physician and endocrinologist), educators, speech/language specialist and direct care professionals.
All strive to create and provide the best Individual Plan of Care based on assessments, direct observation and interview with the child and family. Support services are also available when appropriate for the individual, which includes family therapy, parent/caregiver training, speech/language services and substance abuse treatment therapy.

The development of the Individual Plan of Care is based on assessments, direct observation and interviews with the child and family. Research indicates optimal outcomes occur for individuals who are served with a comprehensive, multidisciplinary approach. We have noted such successes with most of the individuals who complete the program.

Our core strengths include:

- Multidisciplinary treatment approach
- Individualized treatment that focuses on the individual’s strengths
- Ongoing assessment of challenging behaviors
- Integration of parents/guardian in the treatment process
- Continued specialized education/training for team members
- Specialized Treatment Supports (speech & language services, educators, behavior analyst, therapists, psychiatry, nursing)
- 24 hour support and staff monitoring
- Realistic on-going discharge planning from admission to discharge
- Onsite accredited K-12 school with vocational programs
Intellectual/Developmental Disabilities (I/DD) Program

Our program’s core belief is that each child can reach their full potential when given the opportunity to receive needed supports and treatment. Hence, we aspire to create a highly structured, safe and nurturing setting where positive behavior change is encouraged.

Within all of our programs we believe that success in treatment is enhanced by the following goals:

- Unified approach to the program mission: we strive to provide a collaborative approach to afford each child with every opportunity to succeed. We have found that consistency is paramount for children with cognitive delays. Therefore, we place a great deal of resources in developing and implementing strategies to ensure every treatment provider is vested and educated on the identified effective treatment modalities.

- Value based community: We aspire to evaluate each child’s treatment in an ethical and thoughtful matter while incorporating a value system in our treatment approach. Our focus is to base all decisions on what is determined to be best for the individual.

- Enriched learning environment: Motivating both the individuals we serve and their caregivers to learn new skills has had an extremely positive effect on treatment.
Our children and adolescents experience creative and diverse interventions as they likely did not benefit from traditional therapies in prior placements. We find including our caregivers in this process also provides them with potential opportunities for professional growth.

“This was the right program for my son. I can’t express how much I admire the Devereux facility and I am just so happy they are here for him.”

- Mother of a Devereux Resident
Specialized Treatment Services

Individual, Family & Group Therapy

Therapists at the Viera Campus predominantly use a cognitive-behavioral model of therapy for Individual, family and group interventions. This means that therapy focuses on how your child’s thoughts and feelings contribute to the behavior they show in responding to events in their environment. Examples of thinking that can contribute to your child’s emotional and/or behavioral problems include negative beliefs about themselves, assumptions they may make about others’ behavior or unrealistic distorted views of their experiences and/or the world around them.

While each therapist possesses a unique skill set and therapeutic style, all therapy services on campus are governed by Devereux Best Practice Guidelines. Best Practice Guidelines are therapeutic interventions identified by experts through scientifically-based published studies to be most effective in treating a specific disorder or challenging behavioral problem. Your child’s clinical team receives a great deal of oversight and supervision to assist in your loved one’s treatment, ensuring the most useful interventions are being applied. Some additional therapy modalities practiced by our therapists include brief solution-focused therapy, social skills training, progressive muscle relaxation, constructing a trauma narrative, play therapy and psycho-education.

Furthermore, therapy services on campus are guided by the principles of warmth, genuineness and empathy - which research has shown to be strongly related to positive treatment outcomes. In practice, this means that your child’s therapist will work with you and your child in a manner that communicates understanding, respect and a strong desire to be of help.

Applied Behavior Analysis

Behavior Analysts Applied Behavior Analysis (ABA) is a scientific and experimentally driven treatment method used to improve behaviors of social significance. By applying principles of behavior and actively using techniques grounded in ABA, Devereux has been successful in creating and maintaining positive changes and remains the treatment of choice in Devereux’s intellectual/developmental disabilities programs.

By using ABA techniques, Devereux’s behavior analysts are able to identify behaviors in objective and measurable terms, their functions and develop effective and efficient treatment methods to decrease these problem behaviors and teach appropriate replacement behaviors. The ABA treatment process begins with a thorough functional assessment.
This assessment provides the team with a comprehensive overview of the behaviors in need of reduction, their function and other pertinent information about the individual’s history.

A behavior program is then developed and clearly addresses how target problem behaviors shall be reduced and replacement skills that will be taught to the individual. The program is implemented by trained staff and changes are continuously assessed over time through daily data collection with data being reviewed and studied by a behavior analyst. Modifications to behavior programs are made when necessary and all programs are implemented with the supervision of a Master’s or PhD level certified behavior analyst.

Devereux prides itself in providing high quality ABA treatment and employs qualified Board Certified Associate Behavior Analysts (BCABA) and Board Certified Behavior Analysts (BCBA) to provide ABA treatment for its programs.
Commercial Sexual Exploitation of Children Program

For over 25 years in Florida, our therapeutic/residential programs have been treating children who are victims of sexual abuse, sexual trauma and more recently sexual exploitation.

Devereux’s program model is based on advanced clinical expertise, evidence based approaches and techniques to help individuals transition from troubled lives to bright futures filled with personal accomplishments and hope. Some of the fundamental keys to successful treatment outcomes are through trauma informed care, a protected living environment that offers a sense of security and treatment strategies that are designed specifically for each individual’s needs. Our multidisciplinary team allows for expert treatment strategies to help each individual identify and process symptoms related to the trauma of sexual exploitation, increase internal insight into emotions associated with the trauma, increase personal coping skills and help develop an individualized wellness recovery action plan.

The program provides STRIVE RESPECT Curriculum developed specifically for the treatment of sexually exploited children in a residential setting, dialectical behavioural therapy, trauma focused cognitive behavioural therapy as well as individual, group and family therapy.

Through our vast knowledge and practice of trauma informed care we are able to help youth transition from troubled lives to bright futures filled with personal accomplishments and hope.
Diabetes Management Program

At Devereux Florida, we believe it is important to assist individuals in gaining knowledge and control of their illness to reduce risks of long term physical and psychological complications. The Devereux Florida Viera Campus has earned national recognition for successful treatment with children and adolescents experiencing severe behavioral problems, in combination with diabetic health concerns.

Devereux Florida teaches children and adolescents with diabetes how to take control of their illness. Both the intensive residential treatment center and dual diagnosis programs offer a diabetes program which uses age appropriate education and training in conjunction with the treatment programming to help stabilize the disease.

This is accomplished with individual and group teaching concerning diabetes management, as well as assistance with diet and exercise programs. Many clients with type 2 diabetes have been able to lose weight and adopt an exercise routine so they no longer require medication.

Substance Abuse Treatment

Devereux Florida recognizes that many youth struggle with co-occurring mental health and substance abuse issues. We offer a substance abuse treatment track designed to meet the unique recovery needs of children and adolescents facing the challenges of substance abuse or dependence. Individual and group treatment programs are available to address issues pertaining to exposure, behavior and addiction.
While most children and adolescents achieve academic success in a traditional educational environment, some struggle with emotional, intellectual/developmental disabilities and behavioral challenges which require a more tailored learning environment. At Devereux Florida, we understand education is the cornerstone in empowering children with emotional, intellectual/developmental disabilities and behavioral challenges. The Devereux School firmly believes that all students have the ability to achieve academic success.

Located at the Viera Campus, the Devereux School specializes in supporting and educating children with these disabilities, with the goal of allowing them to return home and successfully continue their education in their home public schools. The Devereux School offers an accredited K-12 school, provided with a vast array of therapeutic services offered at the Viera Campus. Our program is unique among other schools in that it is accredited by AdvancED™ and meets standards for over 60 school districts across the United States. All of our teachers are certified in their respective instructional subject area, as well as Exceptional Student Education (ESE). Each classroom is equipped with SMART Boards and the latest technology to nurture learning.

The Devereux School program is designed to advance each student’s academic growth while providing a positive school experience. Our individualized curriculum and low teacher-to-student ratio allows our students to succeed academically. Teachers are provided with daily support from the student’s therapist, behavior analyst and direct service providers to help the student learn, adapt and overcome his/her challenges in the classroom. Many of our students have achieved academic gains of reading at 2 grade levels ahead of where they started in our program, in just a period of a few months. Furthermore, each student receives the appropriate therapeutic support to address behavioral issues occurring in academic settings.
We have had the privilege to make a meaningful impact to the lives of hundreds of youth over the course of the last 25 years in Florida and over 100 years at Devereux nationally. Devereux Florida has worked in partnership with various state agencies, school districts, educational consultants and advocates.

**Devereux School Mission Statement**

Devereux School honors the statement of mission that is held by The Devereux Foundation: Devereux changes lives and nurtures human potential. We inspire hope, ensure well-being and promote meaningful life choices. Our Mission is achieved through a wide range of services and supports for individuals and their families.

**Devereux School Vision**

The Devereux School firmly believes that all students have the ability to achieve academic success. Students are paired with 21st century technology and highly qualified educators to ensure academic excellence. In addition, students will gain skills in self-determination and independent living.

**Student Responsibilities**

- Students have the responsibility to know and obey the rules and laws which govern their conduct while at school and to expect consequences for any inappropriate behavior.
- Schools must provide opportunities for learning. Students have the responsibility to learn and use the educational resources experiences provided for them.
- Students have the responsibility to respect the rights of other persons who may have different points of view on some issues.
- Students have an obligation to attend school and avail themselves of an appropriate education.
- Students have a responsibility to respect the property of others in the school setting and at school activities.
- Students have the responsibility to show respect during the pledge to the flag. Students who do not desire to stand for personal or religious convictions have the choice to remain seated quietly or stand without reciting the pledge.
Student Rights

At school, everyone works to make sure that students are safe. Students must do their part by:

- Not hurting other people or their feelings.
- Not taking things which do not belong to you.
- Not damaging other people’s property or things.
- Dressing in the right manner for school.
- Helping us keep our school neat and clean.

All students have the right to express themselves as long as it does not hurt others. Schools help you grow into a useful and successful adult. To do this, you must take part in all of your class to the best of your ability. All school employees are here to help you do your best. If you have any questions or problems, ask for help. Students who bother others and make it hard for them to learn may be removed from the classroom.

Harassment at School

Every student has the right to learn in an environment untainted by sexual or other forms of harassment or discrimination. Offensive conduct which has the purpose or effect of unreasonably interfering with learning performance or creating an intimidating, hostile, discriminatory or offensive learning environment disrupts the educational process and impedes the legitimate educational concerns of our school. Sexual and other forms of harassment will not be tolerated. Sexual harassment includes any unwelcome sexual advances, requests for sexual favors and verbal or physical contacts of a sexual nature. In all cases, school personnel will take immediate action to protect the victim of alleged abuse. Other prohibited harassment includes conduct which has the purpose of the effect of creating a hostile, discriminatory or offensive learning environment.

Any student who feels he/she has been harassed should immediately report the concern to a staff member or complete a grievance form. In determining whether the alleged conduct constitutes harassment, the totality of the circumstances, nature of the conduct and the context in which the conduct occurred will be investigated and disciplinary action will follow, when necessary.

Non-Discrimination Policy

It is the policy of the Devereux School to offer the opportunity to all students without regard to race, color, gender, religion, national origin, disability, marital status and/or age, except as otherwise provided by Federal Law or by Florida State Law.
Reporting Suspected Abuse Cases

Any person, including teachers, therapists, administrators and support personnel who knows or has reasonable cause to suspect that a child has been abused, abandoned and/or neglected shall report such knowledge or suspicion to the Department of Children and Families in a manner prescribed by law.

Suspensions

Because we are trained to educate students with emotional, behavioral and cognitive needs, the Devereux School at the Viera Campus does not suspend students from school. When a student is consistently disruptive, he/she may be removed from the classroom for a short period of time to allow the student to regroup in an alternative classroom. All academic work that may have been missed during this short time is provided for make-up.

Student Records

A student’s school records are private and confidential. Student records are available to students, parents, guardians, designated school official(s), personnel and others identified by the parent or guardian, in writing, as having a “right to access” the information in the educational record.

Parents/guardians have the right to inspect, review and receive copies of the educational records. If you would like a copy of your child’s student records, call 321.242.9100 ext. 77400.

Visiting the Devereux School

1. We welcome parental visits in the school and are happy for you to meet with any member of your child's educational team. Please call and make an appointment so that we can be sure that the person with whom you would like to talk is available.

2. You will need a Visitor's Badge if you are attending a meeting or if you will be on the campus for any length of time. You can get a Visitor's Badge at the front desk in the Administration Building. Please return the Visitor's Badge to the Administration building prior to leaving the campus.

3. Upon entering the school, check-in with someone in the administrative offices. Parents and/or visitors may not roam freely through the school or any other area of the Devereux campus.
The Devereux School

Attendance
A student who is absent more than nine (9) days, unexcused, within a semester will not receive a passing grade, nor be awarded credits, for that semester. Excused absences include court dates and illness with medical documentation. Students must be present a minimum of four hours to be considered present for that day.

Students may be able to make up work missed for grade or credit within the semester. The student shall have a reasonable amount of time, as determined by the teacher, to complete make-up work.

Unexcused Absences
If a student has more than (9) unexcused absences in a semester, he/she will lose credit for that semester, as noted by “failure due to absences”. In addition, any absence creates difficulties for the student, with lost academic time and lost social opportunities.

School Curriculum
The Devereux School follows the curriculum frameworks published by the Florida Department of Education. All courses for grades 9-12 are credit bearing courses. Grades K-8 instruction is derived from the Florida Sunshine State Standards. Curriculum materials are selected from the adoption list of the local education agency, Brevard District Schools, with supplemental materials chosen by the teacher.

Reading
In accordance with the No Child Left Behind Act, all students enrolled in the Devereux School receive 90 minutes of uninterrupted reading instruction every day. The reading instruction is systematic and focuses upon phonemic awareness, phonics, vocabulary, fluency and comprehension.

Electives
The Devereux School offers a well-rounded educational program that includes elective courses, such as physical education, self-determination, career planning, computer skills, cosmetology, library and life management.
Support Services

Students who qualify for educationally relevant speech/language, occupational therapy, physical therapy or other ancillary services will meet, individually and/or in group setting, with a licensed professional to focus on these needs. These services are prescribed on the Individualized Education Plan (IEP).

School Grading System

The Devereux School will use the Florida state grading system and interpretation of letter grades in grades 3-12 as follows:

<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>Grade Point Average</th>
<th>Value</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90 – 100</td>
<td>4</td>
<td>Outstanding Progress</td>
</tr>
<tr>
<td>B</td>
<td>80 – 89</td>
<td>3</td>
<td>Above Average Progress</td>
</tr>
<tr>
<td>C</td>
<td>70 – 79</td>
<td>2</td>
<td>Average Progress</td>
</tr>
<tr>
<td>D</td>
<td>60 – 69</td>
<td>1</td>
<td>Lowest Acceptable Progress</td>
</tr>
<tr>
<td>F</td>
<td>0 – 59</td>
<td>0</td>
<td>Failure</td>
</tr>
</tbody>
</table>

No grade lower than 39 will be recorded for the marking period average. If a student earns an average grade less than 39 or if a student receives a failing grade due to excessive unexcused absences, the minimum grade to be recorded will be 39. This grading floor is intended to prevent the student from reading a situation where academic motivation is destroyed.

When a student is to receive a failing grade due to excessive absences, the following guidelines will apply:
- Students who have earned an average of 60 or higher will receive a 59 for the grading period.
- Students who have earned an average between 39 and 59 will receive the grade they earned.
- Students who have earned an average of 38 or less will receive 39 for the grading period.
Promotion Requirements (Grades 3-12)

To be promoted, a student must have completed the following:

1. Received a yearly passing grade in the four major academic subject areas (math, language arts, science and social studies)
2. Received a yearly passing grade in at least two or all other courses taken during the year
3. Met attendance requirements

In addition, Florida students must demonstrate mastery of the Sunshine State Standards by scoring Level 2 or above on FCAT Reading and Math. Students may be promoted based upon the criteria set by Brevard District Schools for a Good Cause Exemption. These promotions are exceptions, not the norm.

No student will be assigned a grade level based solely upon age or other factors that relate to social promotion.
Graduation Requirements

Unless otherwise prescribed by the student’s home school district, students at the Devereux School must meet the appropriate graduation requirements, as outlined below.

<table>
<thead>
<tr>
<th>Subject Area</th>
<th>Credits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language Arts</td>
<td>4</td>
</tr>
<tr>
<td>Mathematics</td>
<td>4</td>
</tr>
<tr>
<td>Science</td>
<td>4</td>
</tr>
<tr>
<td>Social Studies</td>
<td>4</td>
</tr>
<tr>
<td>Physical Education</td>
<td>1</td>
</tr>
<tr>
<td>Life Management Skills</td>
<td>.5</td>
</tr>
<tr>
<td>Fine Arts</td>
<td>1</td>
</tr>
<tr>
<td>Career Research &amp; Decision Making</td>
<td>.5</td>
</tr>
<tr>
<td>Electives</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total Credits Required</strong></td>
<td><strong>26</strong></td>
</tr>
</tbody>
</table>

Exceptional Student Education Diploma
Independent Level – Incoming 9th Graders

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
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<td>4</td>
</tr>
<tr>
<td>Mathematics</td>
<td>4</td>
</tr>
<tr>
<td>Science</td>
<td>3</td>
</tr>
<tr>
<td>Social Studies</td>
<td>3</td>
</tr>
<tr>
<td>Physical Education</td>
<td>1</td>
</tr>
<tr>
<td>Life Management &amp; Transition</td>
<td>.5</td>
</tr>
<tr>
<td>Self Determination</td>
<td>.5</td>
</tr>
<tr>
<td>Career Education</td>
<td>4</td>
</tr>
<tr>
<td>Fine Arts</td>
<td>1</td>
</tr>
<tr>
<td>Electives</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total Credits Required</strong></td>
<td><strong>26</strong></td>
</tr>
</tbody>
</table>

Library Services

The Devereux School offers library services to all students. Children are taught to take proper care of books or materials. Lost or damaged books or materials are the financial responsibility of the parents/guardians and students.
**Student Educational Team**

Within 14 days of enrollment, the educational team assigned to the student will meet informally to review historical educational information, determine if additional records are needed, discuss the educational needs for the student and consider an educational plan. No formal changes are made during this meeting. If the educational team feels that further information or assessment may be needed, a formal invitation to the parent/guardian will be developed for a future meeting.

**Special Education Services**

Regardless of formal eligibility, all students of the Devereux School are educated with special services allowed for students of special education. All teachers are certified in the area of Exceptional Student Education. Students who are eligible for specific special education categories have an Individualized Education Plan (IEP) that is developed with input from teachers, parents, guardians, the student and other identified professionals who work with the child. The IEP is reviewed annually, at a minimum.

**Normal School Activities**

Our school prides itself in the vast array of normal activities planned for our students. We host graduations, an annual prom, honor roll celebrations, science fairs, spelling bees, social studies fairs, field days, career days, wellness activities and much, much, more.

**Field Trips**

Field trips are planned to extend and enhance classroom experiences when opportunities and resources permit.

**Lunch**

Lunch is provided for all students in our cafeteria. The food service program is operated under the regulations from the United States Department of Agriculture.

**Immunization Records**

All students must have a current immunization record on file in the school and must meet the requirements listed by the State of Florida and the Department of Health.
Vision Screening

Good visual acuity is expressed as 20/20. In a classroom environment, good acuity is not always enough. Some of the visual tasks require: the ability to see clearly, to change focus from distance to near, to follow along a line of print and good depth perception. Vision screening is provided to all students within 30 days of enrollment into the Devereux School.

Fire Drills

Fire drills are held at school as required by law. Drills may occur at any time of the day. Students are expected to move quickly, as directed by the teacher, to the designated exit-area. Upon completion of the drill, an all-clear signal will be provided and all persons may return to the classrooms.

School Hours

The school day runs from 9:00 a.m. until 3:35 p.m., Monday - Friday. Our school follows the local school board calendar, Brevard District Schools, of 180 regular days of instruction and 20 days of Extended School Year/Summer School.

Treatment Team

Our teachers are members of the student’s treatment team. They provide valuable information to the team who will make clinical decisions regarding the student.

Report Cards

Grades are one method of measuring a student's progress in mastering subject area goals. A student's regular attendance and daily preparation should be consistent with their grades and are taken into consideration when grades are issued.

Report cards will be issued every nine weeks. Interim IEP goal reports are distributed every 4 ½ weeks. These reports contain valuable information regarding your child's specific progress with IEP objectives, subject matter and behavioral issues. Please do not hesitate to contact your child's teacher to address any concerns when you receive your child's report.
Student Dress Code

At Devereux School, we believe that the way people dress affects the way they behave. So, we have a Dress Code that we follow very closely. Students are expected to come to school each day, dressed according to the Dress Code.

- Students must wear shoes at all times. Thong sandals, steel-toed boots and shoes with metal parts are not allowed. Please wear tennis shoes/sneakers for physical education class.
- All students must wear appropriate undergarments. Undergarments are not to be visible or worn outside of clothing.
- Wearing jewelry is discouraged because we cannot be responsible for lost, damaged or stolen items.
- Clothing must cover that navel and the midriff area. All students must wear shirts at all times.
- Sunglasses are not permitted.
- Shorts and shirts should be no shorter than two inches above the knees.
- All clothing must be free of words, references or pictures of the following: obscene or vulgar language, alcohol, drugs, cigarettes, death, Satan, gangs, violence or sexually explicit subjects. Clothing may not be worn in such a way as to symbolize gang activity.
- Clothing must be clean and in good repair, without holes or stains.
- No tank tops or "muscle shirts" are permitted.
- All pants must be worn around the waist. A belt must be worn to hold pants around the waist if needed.
- Hair and make-up are to be gender appropriate and neat. Make-up must not be excessive.
- Trends and "fads" in clothing and accessories are not tolerated, if they do not conform to the dress code. This includes body piercing visible to others.
- Bandanas may not be worn at any time.
- Hats or other head-coverings are not permitted.
- Book bags, backpacks, purses and other items are not to be brought to school. The school provides all necessary school supplies.
- Students may not bring anything to school except their homework and home-note, if requested.

The Principal or her designee reserves the right to make additions to the Dress Code as needed. The Principal or her designee has the final word in all questions regarding the Dress Code.
Food & Dietary Services

A nutritional assessment completed by our medical staff takes place at the time of your child’s admission. Please tell us then or anytime about any special dietary requirements. Food may not be brought to the units from outside the facility. With the permission of the medical staff and the primary therapist, exceptions may be made on special holidays or birthdays for a small food treat. No food is ever allowed your child’s room.

Celebrations & Special Occasions

On special occasions, including birthdays and traditional holidays, the Viera Campus Administration and Food Service Department honors the occasion by hosting festive meals and parties to the children and adolescents we serve. These special celebrations include most of the trimmings we might expect for the occasion with cakes, barbecues, turkeys and decorations – all in keeping with the feast or season.

Community Inclusion Activities

Each child and adolescent has the ability to participate in community activities which include but are not limited to community service activities, civic organizations, adult education, theater, organized sporting leagues, community recreation facilities, museums, space center and the zoo. The individual’s treatment team and program director will approve and outline the activities the resident will be able to participate in based on his/her treatment plan. Consent from the legal guardian must be obtained during admission and all activities are considered voluntary. Devereux Viera Campus staff will be present during all activities.

Interpreter & Language Services

Devereux is comprised of many cultures and languages. Several of our team members, clinical team and physicians are bilingual. If a child and/or guardian is in need of an interpreter Devereux offers telephone, person-to-person, video conferencing, written, educational and sign language services.
Communication Services (Telephone, Mail & Internet Usage)

We understand and recognize the challenges presented when a child is participating in a program that is a great distance from their family and home community. For this reason, we strive to provide support in any way possible to overcome some of these challenges. Your child has the right to use the telephone and send and receive mail on a routine basis unless the treatment team feels it would be harmful to your child’s progress. Program guidelines are set up to help with these communications which includes; each client is allowed two outgoing calls weekly, to people with whom phone contact has been approved. In addition to these calls, as mentioned earlier, your child’s therapist may be contacting you to set up therapeutic phone calls. If you are concerned about anything your child says during a phone call, please communicate it immediately with the therapist or your child’s unit supervisor. Our video conferencing technology provides the opportunity for face-to-face contact, participation in treatment team meetings and during family therapy sessions, when appropriate.

Individuals with parent/guardian permission have access to the internet while in school. The internet connection is provided for educational purposes only. Security is in place to prevent the use of email, instant messaging, chat, social network sites and general web sites that are considered obscene, pornographic or harmful to minors. At the beginning of each semester, students are given specific instruction in the area of cyber safety and cyber bullying. Parents should refer to the "Devereux Florida Student Network and Internet Acceptable Use and Safety Agreement" for further information.

Medical Records

Information about a child may only be given out when the legal guardian signs and files an “Authorization to Release Confidential Client Information Form” with the Admissions Department and/or Medical Records Department or when a judge issues a court order. Records will be mailed to the person and address the parent/guardian specifies on the authorization form. For questions regarding this process, please call the Medical Records Department ext. 77176.

Patient Billing

Our Patient Accounts Specialist will work with you to answer questions or provide information pertaining to billing and/or your child’s account balance. The Patient Account Specialist can be reached at ext. 77589.
Support & Other Services

Smoking
To promote the health and wellness of our residents and staff, Devereux maintains a smoke free environment. We are strongly committed to a philosophy of health and wellness. Any clients admitted who is nicotine dependent can expect supportive comfort and education measures.

Speech Services
Devereux Florida Viera Campus offers certified speech pathology services to individuals who have speech or language difficulties. If your child’s treatment team indicates speech services are needed the speech pathologist will work hand-in-hand with your child’s treatment team to provide optimal treatment results through speech evaluation and treatment. Therapy services include auditory-oral training, myofunctional therapy, articulation therapy, voice therapy and language therapy.

Spiritual Care
Devereux makes every attempt to respect individual and family religious values. We have strong community support surrounding our facility and partner with area non-denominational churches to provide our residents with regular religious-based activities. If you have any requests related to religious services, please ensure you share your thoughts with your child’s treatment team. We will attempt to meet those needs by accessing our community resources, if possible.

Socialization & Recreation Program
At the Devereux Florida Campus, we recognize most of our individuals struggle with acceptance from their peers and an inability to live cooperatively with others. Therefore, our youth are provided with constant adult attention by our trained professionals who are well versed in using numerous techniques to integrate kids with special needs into a more normalized living arrangement.

In addition, the campus offers opportunities to participate in Club Advantage, an after school and weekend program tailored help with socialization and recreation. With over 30 clubs offered throughout the year, your child is sure to find a special talent or interest to promote social integration.
Discharge Planning & Continued Care

We offer enhanced discharge planning. A continued care plan is developed for your child to help support and strengthen gains made while at Devereux as well as to encourage further progress after his or her stay here.

Devereux Florida also offers specialized therapeutic group homes, intellectual/developmental disabilities group homes, family care, foster care, residential group care and outpatient family counseling services. All are available to serve as step down placements or services to help support each individual to returning home or for independent living.

Visitation

At the Devereux Florida Campus, we recognize the challenges presented when a child is participating in a program away from home. We also encourage family involvement during treatment. For this reason, our treatment teams work closely with each individual’s parents, caregivers, guardians and funders to schedule family visits and home passes. Visits and home passes are determined based upon your child’s treatment plan.

Other Medical Services & Expenses

Residential services are charged on a day rate basis that includes expenses that relate to the psychiatric, nursing, and room and board care provided at Devereux. The day rate also includes the following services: Social & Family Therapy Services, Activity Therapy, Special Therapeutic Education, Vocational Rehabilitation, Speech/Language Pathology, Behavioral Programming and Nutritional Services.

Not included in the daily rate are other medical services that may or may not be necessary for your child. These include:

- Dental
- X-rays
- Optical
- Pharmacy
- Dietician Services (outside consultant)
- Gynecological
- Cardiology
- Lab Testing
- 1-to-1 Special Care
- Psychological Evaluations
- Physical or Occupational Therapy
- Emergency Room/Treatment Services
- Neurological Psychological Exams
- Other Special Services Rendered Outside of Devereux

Also not included in the daily rates are personal and clothing allowances (unless in contract) and travel expenses for therapeutic home visits. The Finance Department will contact you before these arrangements are finalized. Please call them if you have any questions about billing.
What To Pack

Your child should bring adequate clothing for his or her stay at Devereux. Please consider his or her special needs and the seasons of the year. Keep in mind that Florida is very warm (75° to 95°) for about ten months each year. Living units are air conditioned, but clients should be prepared to dress for daily outside activities. Below is a suggested list to guide you in packing:

### Boys & Young Men

<table>
<thead>
<tr>
<th>Clothing</th>
<th>Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>Casual Shirts – 7</td>
<td>□ Belts - 2</td>
</tr>
<tr>
<td>Casual pants/jeans 7</td>
<td>□ Jacket/Coat – 1</td>
</tr>
<tr>
<td>Shorts -7</td>
<td>□ Sweater – 1</td>
</tr>
<tr>
<td>T-shirts – 7</td>
<td>□ Bathrobe (if wanted)</td>
</tr>
<tr>
<td>Underwear – 7</td>
<td></td>
</tr>
<tr>
<td>Undershirts - 7</td>
<td></td>
</tr>
<tr>
<td>Socks – 7 pairs</td>
<td>*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clothing</th>
<th>Shoes</th>
<th>Other/Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Casual Shirts – 7</td>
<td>□ Sneakers – 2 pair</td>
<td></td>
</tr>
<tr>
<td>□ Casual pants/jeans 7</td>
<td>□ Slippers – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Shorts -7</td>
<td>□ Other Shoes – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ T-shirts – 7</td>
<td>□ Dress Shoes – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Underwear – 7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Undershirts - 7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Socks – 7 pairs</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clothing</th>
<th>Shoes</th>
<th>Other/Accessories</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Pajamas – 3</td>
<td>□ Sneakers – 2 pair</td>
<td></td>
</tr>
<tr>
<td>□ Swimsuit – 2</td>
<td>□ Slippers – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Sweat Suit – 1 pair</td>
<td>□ Other Shoes – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Dress Shirts – 2 *</td>
<td>□ Dress Shoes – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Dress Slacks – 2 *</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Sweater - 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Girls & Young Women

<table>
<thead>
<tr>
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<tbody>
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<tr>
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</tr>
<tr>
<td>Shorts -7</td>
<td>□ Sweater – 1</td>
</tr>
<tr>
<td>T-shirts – 7</td>
<td>□ Panty Hose – 4</td>
</tr>
<tr>
<td>Dresses - 2</td>
<td>□ Bathrobe – 1</td>
</tr>
<tr>
<td>Underwear – 7</td>
<td>□ Hair Accessories (no hairpins)</td>
</tr>
<tr>
<td>Bras - 7</td>
<td></td>
</tr>
<tr>
<td>Socks – 7 pairs</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<tr>
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<tr>
<td>□ Casual pants/jeans - 7</td>
<td>□ Slippers – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ Shorts -7</td>
<td>□ Other Shoes – 1 pair</td>
<td></td>
</tr>
<tr>
<td>□ T-shirts – 7</td>
<td>□ Dress Shoes – 1 pair</td>
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</tr>
<tr>
<td>□ Dresses - 2</td>
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<td>□ Underwear – 7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Bras - 7</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| □ Socks – 7 pairs | | *

* Business-type outfit is needed for special school events and job interviews. It is not needed for boys ages 6 – 13.
Special note: Provocative clothing such as bare midriff shirts, tight pants, short shorts, skort-skirts and clothing with alcohol, drug or satanic logos are prohibited at Devereux. Devereux reserves the right to restrict any child from wearing any inappropriate attire.

1. Please keep in mind that closet and drawer space is limited.
2. Devereux provides personal bed linens, pillows, blankets, bedspreads, towels, wash cloths and toiletries.
3. Clients on specified levels may wear earrings. Nose rings, tongue and belly piercing are not permitted.
4. Outgrown clothing will be added to the Devereux clothing bank unless you request that it be mailed home.

Personal Possessions

We encourage personal self-expression and understand that your child may wish to bring personal possessions to use or to decorate his or her room. However, we are unable to accept financial responsibility for the loss, breakage or theft of such personal possessions. We require that personal possessions be limited. For example, we do not allow items exceeding $50.00 in value or any of the following items:

- Expensive jewelry
- Stereo Equipment
- Televisions
- Irreplaceable sentimental items
- Breakable Knickknacks
- Glass Picture Frames
- Clocks
- Electronic Equipment
- Cameras & Videos
- Devices allowing internet access
- Cell Phones
- Collectables (stamps, baseball cards)

Money & Personal Funds

Children and adolescents are not allowed to have money in their possession while on campus. We have an interest-bearing account with Wachovia Bank for your child’s personal funds. We encourage you to participate in this program by providing your child with a monthly allowance. This allowance would provide for clothing and special items that your child may need. Access to these funds is through written permission in the form of a “Client Funds Request Form”. Persons authorized to access these funds are the program director, primary therapist and/or the parents. Receipts are turned into the Viera Campus Finance Department within three days of expenditure. Upon discharge, the remaining balance will be forwarded to the parent/guardian responsible for the child or to his/her new place of residence, within 30 days after discharge.
Your Child’s Health & Safety

Devereux Florida places a high priority on maintaining a safe environment for our patients, team members, physicians and visitors. Our risk management team conducts routine inspections, evaluations and monitoring of all our facilities.

Your Child’s Health

Nurses are on campus 24/7 on every residential housing unit to monitor your child’s health and address any concerns. In addition, an on-site pediatrician and psychiatrists take care of your child’s health care needs throughout his/her stay.

All Devereux team members are CPR Certified, First Aid Certified and have ongoing training in Emergency Preparedness throughout the year. Life safety reviews are conducted and reviewed by the Agency for Health Care Administration (AHCA) periodically throughout the year.

The following health care services will be performed upon admission:

- The attending physician will complete a physical exam, review your child’s medical history and current medical records within 24 hours
- Our pediatric endocrinologist will also review your child’s medical chart
- Review of immunization history and schedule any needed immunizations
- EKG test
- Blood work
- Tuberculosis Skin Test (PPD Skin Test)
- Eye exam
- Dental exam and any follow-ups necessary

Additional appointments with our on-site pediatrician or a specialist will be scheduled if your child has an illness, injury or ongoing medical issue. In addition, physical therapy and/or occupational therapy exams and treatment are performed if deemed necessary by our physician or your child’s school IEP.

Safe Environment

We believe in positive behavior interventions and supports along with safe and positive approaches. All team members that have direct contact with children and adolescents on our campus have been fully trained in these techniques and approaches.
If a threatening situation arises among a child or adolescent that could cause serious physical injury or trauma to themselves or others verbal de-escalation techniques will be performed. At times when all other techniques have failed therapeutic holds may be used to ensure safety among themselves or others. All staff participating in a physical restraint receives in-depth, on-going training on the approved Devereux Safe and Positive Approaches (SPA) curriculum. These techniques used to secure individuals from their own protection and of those around them are applied until the individual is calm and safe. There is constant direct supervision of the client while in seclusion or restraints. A nurse is always assigned to monitor the client’s physical well-being during these procedures. The Medical Director monitors the use of these procedures on a daily basis.

**Environmental Health**

Devereux Florida Viera Campus is licensed by the Agency for Health Care Administration (AHCA) and accredited by the Joint Commission on Accreditation of Healthcare Organizations. The Joint Commission evaluates and accredits healthcare organizations and programs in the United States by setting quality improvement goals being met in 10 “core measure” areas. Devereux has a long history with the Joint Commission as we were one of the first organizations accredited in behavioral healthcare. Fewer than 10% of providers in the behavioral healthcare industry accomplish the Joint Commission accreditation.

With our licensing and accreditation we must pass a rigorous environmental health inspection to ensure that the campus and grounds do not pose any risk to our patients or staff. This includes, but is not limited to, monthly monitoring for environmental care checks to secure safety.
Your Child’s Health & Safety

Supervision
Devereux Viera Campus is a fully supervised program. This means that all residents are always under direct supervision. There is direct awake supervision, 24 hours a day, 7 days a week. Our individual to staff ratio is always 1:4 or better, depending upon the treatment team’s evaluation of each child’s individual needs.

Our direct care professional staff is responsible for the safety and care of your child. They receive a great deal of training from the treatment team as well as mandatory corporate training on safety policies and procedures, CPR training, safe and positive approach techniques that are evaluated several times a year. The Viera Campus also has secure buildings and monitored video surveillance throughout the campus to ensure safety.

Safe Environment
We believe in positive behavior interventions and supports along with safe and positive approaches. All team members that have direct contact with children and adolescents on our campus have been fully trained in these techniques and approaches.

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Fire, Tornado & Severe Weather Protocols
The Devereux Florida Viera Campus ensures all staff is trained in emergency preparedness as it relates to severe weather, fires, tornadoes or hurricanes. Clear and established policies, protocols and training are designed to address these potential events. Fire drills are completed on a monthly basis in all residential housing units to ensure residents and team members are made aware of what is required when such incidences occur. All efforts are proactive in nature to deal with any of these impending threats.
Grievance Procedures & Resolution of Conflicts

1. Each client and their legal guardian have the right to express any concerns and complaints related to the care and services provided to them during treatment with any Devereux Program.

2. Each program will have the grievance forms accessible to clients and their legal guardians at the Program Office and at the home.

3. If the client requests assistance with completion of the form, such assistance will be provided.

4. No staff or parent will discourage a client or their guardian from filling a grievance. If a staff member assists in completing the grievance form, the client/guardians’ exact words will be used. Staff will not lead the client by asking any questions. The client/guardian will state what the grievance is about and how they would like it worded.

5. The grievance form will be read back to the grievant so they can acknowledge that it correctly states their grievance. The client will be given the opportunity to sign the grievance, and the staff member or parent serving as a scribe must also sign the form.

6. The grievant will have the opportunity to be in receipt of a copy of the filled grievance.

7. All grievance forms will be directed toward the Program Manager who will be responsible for handling the initial investigation.

8. The client/guardian may also have the opportunity to seal the grievance in an envelope and send it to whomever they so choose. If requested, the client will be provided with a pre-addressed stamped envelope.

9. Any grievance pertaining to psychiatric services will be sent to the Medical Director for resolution. The Medical Director will notify the Program Manager and Administrator. If the grievance pertains to the Program Manager or Medical Director, the grievance will be sent to the Program Administrator for resolution.

10. The client/guardian will have the opportunity to meet with the Program Manager or Director to review and attempt to solve the grievance. Either party will be given a full opportunity to gather any additional information necessary to resolve the grievance.

11. All completed grievance forms will be sent to the Manager of Standards and Contracts.

12. The completed grievance will be sent to the quality management department.
Immunizations Addendum

VACCINE INFORMATION STATEMENT

Influenza Vaccine
Inactivated
What You Need to Know

1 Why get vaccinated?

Influenza (“flu”) is a contagious disease. It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions.

Anyone can get influenza, but rates of infection are highest among children. For most people, symptoms last only a few days. They include:
- fever/chills
- sore throat
- muscle aches
- fatigue
- cough
- headache
- runny or stuffy nose

Other illnesses can have the same symptoms and are often mistaken for influenza.

Young children, people 65 and older, pregnant women, and people with certain health conditions — such as heart, lung or kidney disease, or a weakened immune system — can get much sicker. Flu can cause high fever and pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. Each year thousands of people die from influenza and even more require hospitalization.

By getting flu vaccine you can protect yourself from influenza and may also avoid spreading influenza to others.

2 Inactivated influenza vaccine

There are two types of influenza vaccine:

1. Inactivated (killed) vaccine, the “flu shot,” is given by injection with a needle.

2. Live, attenuated (weakened) influenza vaccine is sprayed into the nostrils. This vaccine is described in a separate Vaccine Information Statement.

A “high-dose” inactivated influenza vaccine is available for people 65 years of age and older. Ask your doctor for more information.

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year. Flu vaccine will not prevent disease from other viruses, including flu viruses not contained in the vaccine.

It takes up to 2 weeks for protection to develop after the shot. Protection lasts about a year.

Some inactivated influenza vaccine contains a preservative called thimerosal. Thimerosal-free influenza vaccine is available. Ask your doctor for more information.

3 Who should get inactivated influenza vaccine and when?

WHO

All people 6 months of age and older should get flu vaccine.

Vaccination is especially important for people at higher risk of severe influenza and their close contacts, including healthcare personnel and close contacts of children younger than 6 months.

WHEN

Get the vaccine as soon as it is available. This should provide protection if the flu season comes early. You can get the vaccine as long as illness is occurring in your community.

Influenza can occur at any time, but most influenza occurs from October through May. In recent seasons, most infections have occurred in January and February. Getting vaccinated in December, or even later, will still be beneficial in most years.

Adults and older children need one dose of influenza vaccine each year. But some children younger than 9 years of age need two doses to be protected. Ask your doctor.

Influenza vaccine may be given at the same time as other vaccines, including pneumococcal vaccine.

4 Some people should not get inactivated influenza vaccine or should wait.

- Tell your doctor if you have any severe (life-threatening) allergies, including a severe allergy to eggs. A severe allergy to any vaccine component may be a reason not to get the vaccine. Allergic reactions to influenza vaccine are rare.
Influenza Vaccine
Live, Intranasal
What You Need to Know

1 Why get vaccinated?

Influenza ("flu") is a contagious disease. It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions.

Anyone can get influenza, but rates of infection are highest among children. For most people, symptoms last only a few days. They include:

- fever/chills
- sore throat
- muscle aches
- fatigue
- cough
- headache
- runny or stuffy nose

Other illnesses can have the same symptoms and are often mistaken for influenza.

Young children, people 65 and older, pregnant women, and people with certain health conditions — such as heart, lung or kidney disease, or a weakened immune system — can get much sicker. Flu can cause high fever and pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. Each year thousands of people die from influenza and even more require hospitalization.

By getting flu vaccine you can protect yourself from influenza and may also avoid spreading influenza to others.

2 Live, attenuated influenza vaccine - LAIV (nasal spray)

There are two types of influenza vaccine:

1. Live, attenuated influenza vaccine (LAIV) contains live but attenuated (weakened) influenza virus. It is sprayed into the nostrils.

2. Inactivated (killed) influenza vaccine, the "flu shot," is given by injection with a needle. This vaccine is described in a separate Vaccine Information Statement.

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year. Flu vaccine will not prevent disease from other viruses, including flu viruses not contained in the vaccine.

It takes up to 2 weeks for protection to develop after the vaccination. Protection lasts about a year.

LAIV does not contain thimerosal or other preservatives.

3 Who can receive LAIV?

LAIV is recommended for healthy people 2 through 49 years of age, who are not pregnant and do not have certain health conditions (see #4, below).

4 Some people should not receive LAIV

LAIV is not recommended for everyone. The following people should get the inactivated vaccine ("flu shot") instead:

- Adults 50 years of age and older or children from 6 through 23 months of age. (Children younger than 6 months should not get either influenza vaccine.)
- Children younger than 5 years with asthma or one or more episodes of wheezing within the past year.
- Pregnant women.
- People who have long-term health problems with:
  - heart disease
  - kidney or liver disease
  - lung disease
  - metabolic disease, such as diabetes
  - asthma
  - anemia, and other blood disorders
- Anyone with certain muscle or nerve disorders (such as seizure disorders or cerebral palsy) that can lead to breathing or swallowing problems.
- Anyone with a weakened immune system.
- Anyone in close contact with someone whose immune system is so weak they require care in a protected environment (such as a bone marrow transplant unit).
- Close contacts of other people with a weakened immune system (such as those with HIV) may receive LAIV.
- Healthcare personnel in neonatal intensive care units or oncology clinics may receive LAIV.
- Children or adolescents on long-term aspirin treatment.

Tell your doctor if you have any severe (life-threatening) allergies, including a severe allergy to eggs. A severe allergy to any vaccine component may be a reason not to get the vaccine. Allergic reactions to influenza vaccine are rare.

Tell your doctor if you ever had a severe reaction after a dose of influenza vaccine.

Tell your doctor if you ever had Guillain-Barré Syndrome (a severe paralytic illness, also called GBS). Your doctor will help you decide whether the vaccine is recommended for you.
Immunizations Addendum

Tell your doctor if you have gotten any other vaccines in the past 4 weeks.

Anyone with a nasal condition serious enough to make breathing difficult, such as a very stuffy nose, should get the flu shot instead.

People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If you are ill, talk to your doctor about whether to reschedule the vaccination. People with a mild illness can usually get the vaccine.

5 When should I receive influenza vaccine?

Get the vaccine as soon as it is available. This should provide protection if the flu season comes early. You can get the vaccine as long as illness is occurring in your community.

Influenza can occur any time, but most influenza occurs from October through May. In recent seasons, most infections have occurred in January and February. Getting vaccinated in December, or even later, will still be beneficial in most years.

Adults and older children need one dose of influenza vaccine each year. But some children younger than 9 years of age need two doses to be protected. Ask your doctor.

Influenza vaccine may be given at the same time as other vaccines.

6 What are the risks from LAIV?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of a vaccine causing serious harm, or death, is extremely small.

Live influenza vaccine viruses very rarely spread from person to person. Even if they do, they are not likely to cause illness.

LAIV is made from weakened virus and does not cause influenza. The vaccine can cause mild symptoms in people who get it (see below).

Mild problems:
Some children and adolescents 2-17 years of age have reported:
• runny nose, nasal congestion or cough  •  fever
• headache and muscle aches  •  wheezing
• abdominal pain or occasional vomiting or diarrhea

Some adults 18-49 years of age have reported:
• runny nose or nasal congestion  •  sore throat
• cough, chills, tiredness/weakness  •  headache

Severe problems:
Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the vaccination.

If rare reactions occur with any product, they may not be identified until thousands, or millions, of people have used it. Millions of doses of LAIV have been distributed since it was licensed, and the vaccine has not been associated with any serious problems.

The safety of vaccines is always being monitored. For more information, visit:
www.cdc.gov/vaccinesafety/Vaccine_Monitoring/Index.html
and
www.cdc.gov/vaccinesafety/Activities/Activities_Index.html

7 What if there is a severe reaction?

What should I look for?
Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?
• Call a doctor, or get the person to a doctor right away.
• Tell the doctor what happened, the date and time it happened, and when the vaccination was given.
• Ask your doctor to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS’s website at www.vaers.hhs.gov, or by calling 1-800-822-7967.
VAERS does not provide medical advice.

8 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) was created in 1986.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382, or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

9 How can I learn more?

• Ask your doctor. They can give you the vaccine package insert or suggest other sources of information.
• Call your local or state health department.
• Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO) or
  - Visit CDC’s website at www.cdc.gov/flu

Vaccine Information Statement (Interim)
Influenza Vaccine
(Live, Attenuated)
7/2/2012
42 U.S.C. § 300aa-26
CHICKENPOX VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1. Why get vaccinated?

Chickenpox (also called varicella) is a common childhood disease. It is usually mild, but it can be serious, especially in young infants and adults.
- It causes a rash, itching, fever, and tiredness.
- It can lead to severe skin infection, scars, pneumonia, brain damage, or death.
- The chickenpox virus can be spread from person to person through the air, or by contact with fluid from chickenpox blisters.
- A person who has had chickenpox can get a painful rash called shingles years later.
- Before the vaccine, about 11,000 people were hospitalized for chickenpox each year in the United States.
- Before the vaccine, about 100 people died each year as a result of chickenpox in the United States.

Chickenpox vaccine can prevent chickenpox.
Most people who get chickenpox vaccine will not get chickenpox. But if someone who has been vaccinated does get chickenpox, it is usually very mild. They will have fewer blisters, are less likely to have a fever, and will recover faster.

2. Who should get chickenpox vaccine and when?

Routine
Children who have never had chickenpox should get 2 doses of chickenpox vaccine at these ages:
1st Dose: 12-15 months of age
2nd Dose: 4-6 years of age (may be given earlier, if at least 3 months after the 1st dose)

People 13 years of age and older (who have never had chickenpox or received chickenpox vaccine) should get two doses at least 28 days apart.

Chickenpox 3/13/08

Catch-Up

Anyone who is not fully vaccinated, and never had chickenpox, should receive one or two doses of chickenpox vaccine. The timing of these doses depends on the person’s age. Ask your provider.

Chickenpox vaccine may be given at the same time as other vaccines.

Note: A “combination” vaccine called MMRV, which contains both chickenpox and MMR vaccines, may be given instead of the two individual vaccines to people 12 years of age and younger.

3. Some people should not get chickenpox vaccine or should wait

- People should not get chickenpox vaccine if they have ever had a life-threatening allergic reaction to a previous dose of chickenpox vaccine or to gelatin or the antibiotic neomycin.
- People who are moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting chickenpox vaccine.
- Pregnant women should wait to get chickenpox vaccine until after they have given birth. Women should not get pregnant for 1 month after getting chickenpox vaccine.
- Some people should check with their doctor about whether they should get chickenpox vaccine, including anyone who:
  - Has HIV/AIDS or another disease that affects the immune system
  - Is being treated with drugs that affect the immune system, such as steroids, for 2 weeks or longer
  - Has any kind of cancer
  - Is getting cancer treatment with radiation or drugs
- People who recently had a transfusion or were given other blood products should ask their doctor when they may get chickenpox vaccine.

Ask your provider for more information.
VACCINE INFORMATION STATEMENT

Td or Tdap (Tetanus-Diphtheria or Tetanus-Diphtheria-Pertussis) Vaccine

What You Need to Know

1. Why get vaccinated?

Tetanus, diphtheria and pertussis can be very serious diseases.

**TETANUS** (Lockjaw) causes painful muscle spasms and stiffness, usually all over the body.
- It can lead to tightening of muscles in the head and neck so the victim cannot open his mouth or swallow, or sometimes even breathe. Tetanus kills about 1 out of 5 people who are infected.

**DIPHTHERIA** can cause a thick membrane to cover the back of the throat.
- It can lead to breathing problems, paralysis, heart failure, and even death.

**PERTUSSIS** (Whooping Cough) causes severe coughing spells which can lead to difficulty breathing, vomiting, and disturbed sleep.
- It can lead to weight loss, incontinence, rib fractures and passing out from violent coughing. Up to 2 in 100 adolescents and 5 in 100 adults with pertussis are hospitalized or have complications, including pneumonia and death.

These three diseases are all caused by bacteria. Diphtheria and pertussis are spread from person to person. Tetanus enters the body through cuts, scratches, or wounds.

The United States saw as many as 200,000 cases a year of diphtheria and pertussis before vaccines were available, and hundreds of cases of tetanus. Since then, tetanus and diphtheria cases have dropped by about 99% and pertussis cases by about 92%.

Children 6 years of age and younger get DTaP vaccine to protect them from these three diseases. But older children, adolescents, and adults need protection too.

2. Vaccines for adolescents and adults: Td and Tdap

Two vaccines are available to protect people 7 years of age and older from these diseases:

- Td vaccine has been used for many years. It protects against tetanus and diphtheria.
- Tdap vaccine was licensed in 2005. It is the first vaccine for adolescents and adults that protects against pertussis as well as tetanus and diphtheria.

A Td booster dose is recommended every 10 years. Tdap is given only once.

3. Which vaccine, and when?

**Ages 7 through 18 years**

- A dose of Tdap is recommended at age 11 or 12. This dose could be given as early as age 7 for children who missed one or more childhood doses of DTaP.

4. Some people should not be vaccinated or should wait

- Anyone who has had a life-threatening allergic reaction after a dose of any tetanus, diphtheria, or pertussis containing vaccine should not get Td or Tdap.

- Anyone who has a severe allergy to any component of a vaccine should not get that vaccine. Tell your doctor if the person getting the vaccine has any severe allergies.

- Anyone who had a coma, or long or multiple seizures within 7 days after a dose of DTP or DTaP should not get Tdap, unless a cause other than the vaccine was found. These people may get Td.

**Children and adolescents who did not get a complete series of DTaP shots by age 7 should complete the series using a combination of Td and Tdap.**

**Age 19 years and Older**

- All adults should get a booster dose of Td every 10 years. Adults under 65 who have never gotten Tdap should get a dose of Tdap as their next booster dose. Adults 65 and older may get one booster dose of Tdap.

- Adults (including women who may become pregnant and adults 65 and older) who expect to have close contact with a baby younger than 12 months of age should get a dose of Tdap to help protect the baby from pertussis.

- Healthcare professionals who have direct patient contact in hospitals or clinics should get one dose of Tdap.

**Protection After a Wound**

- A person who gets a severe cut or burn might need a dose of Td or Tdap to prevent tetanus infection. Tdap should be used for anyone who has never had a dose previously. Td should be used if Tdap is not available, or for:
  - anybody who has already had a dose of Tdap,
  - children 7 through 9 years of age who completed the childhood DTaP series, or
  - adults 65 and older.

**Pregnant Women**

- Pregnant women who have never had a dose of Tdap should get one, after the 20th week of gestation and preferably during the 3rd trimester. If they do not get Tdap during their pregnancy they should get a dose as soon as possible after delivery. Pregnant women who have previously received Tdap and need tetanus or diphtheria vaccine while pregnant should get Td.

Tdap or Td may be given at the same time as other vaccines.
Hepatitis B Vaccine

What You Need to Know

1. What is hepatitis B?

Hepatitis B is a serious infection that affects the liver. It is caused by the hepatitis B virus.

- In 2009, about 38,000 people became infected with hepatitis B.
- Each year about 2,000 to 4,000 people die in the United States from cirrhosis or liver cancer caused by hepatitis B.

Hepatitis B can cause:

Acute (short-term) illness. This can lead to:
- loss of appetite
- diarrhea and vomiting
- tiredness
- jaundice (yellow skin or eyes)
- pain in muscles, joints, and stomach

Acute illness, with symptoms, is more common among adults. Children who become infected usually do not have symptoms.

Chronic (long-term) infection. Some people go on to develop chronic hepatitis B infection. Most of them do not have symptoms, but the infection is still very serious, and can lead to:
- liver damage (cirrhosis)
- liver cancer
- death

Chronic infection is more common among infants and children than among adults. People who are chronically infected can spread hepatitis B virus to others, even if they don’t look or feel sick. Up to 1.4 million people in the United States may have chronic hepatitis B infection.

Hepatitis B virus is easily spread through contact with the blood or other body fluids of an infected person. People can also be infected from contact with a contaminated object, where the virus can live for up to 7 days.

- A baby whose mother is infected can be infected at birth;
- Children, adolescents, and adults can become infected by:
  - contact with blood and body fluids through breaks in the skin such as bites, cuts, or sores;
  - contact with objects that have blood or body fluids on them such as toothbrushes, razors, or monitoring and treatment devices for diabetes;
  - having unprotected sex with an infected person;
  - sharing needles when injecting drugs;
  - being stuck with a used needle.

2. Hepatitis B vaccine: Why get vaccinated?

Hepatitis B vaccine can prevent hepatitis B, and the serious consequences of hepatitis B infection, including liver cancer and cirrhosis.

Hepatitis B vaccine may be given by itself or in the same shot with other vaccines.

Routine hepatitis B vaccination was recommended for some U.S. adults and children beginning in 1982, and for all children in 1991. Since 1990, new hepatitis B infections among children and adolescents have dropped by more than 95% — and by 75% in other age groups.

Vaccination gives long-term protection from hepatitis B infection, possibly lifelong.

3. Who should get hepatitis B vaccine and when?

Children and Adolescents

- Babies normally get 3 doses of hepatitis B vaccine:
  1st Dose: Birth
  2nd Dose: 1-2 months of age
  3rd Dose: 6-18 months of age

Some babies might get 4 doses, for example, if a combination vaccine containing hepatitis B is used.

(This is a single shot containing several vaccines.) The extra dose is not harmful.

- Anyone through 18 years of age who didn’t get the vaccine when they were younger should also be vaccinated.

Adults

- All unvaccinated adults at risk for hepatitis B infection should be vaccinated. This includes:
  - sex partners of people infected with hepatitis B,
  - men who have sex with men,
  - people who inject street drugs,
  - people with more than one sex partner,
  - people with chronic liver or kidney disease,
  - people under 60 years of age with diabetes,
  - people with jobs that expose them to human blood or other body fluids,
Immunizations Addendum

- household contacts of people infected with hepatitis B,
- residents and staff in institutions for the developmentally disabled,
- kidney dialysis patients,
- people who travel to countries where hepatitis B is common,
- people with HIV infection.

- Other people may be encouraged by their doctor to get hepatitis B vaccine; for example, adults 60 and older with diabetes. Anyone else who wants to be protected from hepatitis B infection may get the vaccine.

- Pregnant women who are at risk for one of the reasons stated above should be vaccinated. Other pregnant women who want protection may be vaccinated.

Adults getting hepatitis B vaccine should get 3 doses — with the second dose given 4 weeks after the first and the third dose 5 months after the second. Your doctor can tell you about other dosing schedules that might be used in certain circumstances.

4 Who should not get hepatitis B vaccine?

- Anyone with a life-threatening allergy to yeast, or to any other component of the vaccine, should not get hepatitis B vaccine. Tell your doctor if you have any severe allergies.

- Anyone who has had a life-threatening allergic reaction to a previous dose of hepatitis B vaccine should not get another dose.

- Anyone who is moderately or severely ill when a dose of vaccine is scheduled should probably wait until they recover before getting the vaccine.

Your doctor can give you more information about these precautions.

Note: You might be asked to wait 28 days before donating blood after getting hepatitis B vaccine. This is because the screening test could mistake vaccine in the bloodstream (which is not infectious) for hepatitis B infection.

5 What are the risks from hepatitis B vaccine?

Hepatitis B is a very safe vaccine. Most people do not have any problems with it.

The vaccine contains non-infectious material, and cannot cause hepatitis B infection.

Some mild problems have been reported:

- Soreness where the shot was given (up to about 1 person in 4).
- Temperature of 99.9°F or higher (up to about 1 person in 15).

Severe problems are extremely rare. Severe allergic reactions are believed to occur about once in 1.1 million doses.

A vaccine, like any medicine, could cause a serious reaction. But the risk of a vaccine causing serious harm, or death, is extremely small. More than 100 million people in the United States have been vaccinated with hepatitis B vaccine.

6 What if there is a moderate or severe reaction?

What should I look for?

- Any unusual condition, such as a high fever or unusual behavior. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

7 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) was created in 1986.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

8 How can I learn more?

- Ask your doctor. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO) or
  - Visit CDC’s website at www.cdc.gov/vaccines

Vaccine Information Statement (Interim)

Hepatitis B Vaccine

2/2/2012

42 U.S.C. § 300aa-26
Meningococcal Vaccines

What You Need to Know

1. What is meningococcal disease?

Meningococcal disease is a serious bacterial illness. It is a leading cause of bacterial meningitis in children 2 through 18 years old in the United States. Meningitis is an infection of the covering of the brain and the spinal cord.

Meningococcal disease also causes blood infections. About 1,000 - 1,200 people get meningococcal disease each year in the U.S. Even when they are treated with antibiotics, 10-15% of these people die. Of those who live, another 11%-19% lose their arms or legs, have problems with their nervous systems, become deaf, or suffer seizures or strokes.

Anyone can get meningococcal disease. But it is most common in infants less than one year of age and people 16-21 years. Children with certain medical conditions, such as lack of a spleen, have an increased risk of getting meningococcal disease. College freshmen living in dorms are also at increased risk.

Meningococcal infections can be treated with drugs such as penicillin. Still, many people who get the disease die from it, and many others are affected for life. This is why preventing the disease through use of meningococcal vaccine is important for people at highest risk.

2. Meningococcal vaccine

There are two kinds of meningococcal vaccine in the U.S.:

- Meningococcal conjugate vaccine (MCV4) is the preferred vaccine for people 55 years of age and younger.

- Meningococcal polysaccharide vaccine (MPSV4) has been available since the 1970s. It is the only meningococcal vaccine licensed for people older than 55.

Both vaccines can prevent 4 types of meningococcal disease, including 2 of the 3 most common in the United States and a type that causes epidemics in Africa. There are other types of meningococcal disease; the vaccines do not protect against these.

3. Who should get meningococcal vaccine and when?

Routine Vaccination

Two doses of MCV4 are recommended for adolescents 11 through 18 years of age: the first dose at 11 or 12 years of age, with a booster dose at age 16.

Adolescents in this age group with HIV infection should get three doses: 2 doses 2 months apart at 11 or 12 years, plus a booster at age 16.

If the first dose (or series) is given between 13 and 15 years of age, the booster should be given between 16 and 18. If the first dose (or series) is given after the 16th birthday, a booster is not needed.

Other People at Increased Risk

- College freshmen living in dormitories.
- Laboratory personnel who are routinely exposed to meningococcal bacteria.
- U.S. military recruits.
- Anyone traveling to, or living in, a part of the world where meningococcal disease is common, such as parts of Africa.
- Anyone who has a damaged spleen, or whose spleen has been removed.
- Anyone who has persistent complement component deficiency (an immune system disorder).
- People who might have been exposed to meningitis during an outbreak.

Children between 9 and 23 months of age, and anyone else with certain medical conditions need 2 doses for adequate protection. Ask your doctor about the number and timing of doses, and the need for booster doses.

MCV4 is the preferred vaccine for people in these groups who are 9 months through 55 years of age. MPSV4 can be used for adults older than 55.
Some people should not get meningococcal vaccine or should wait.

- Anyone who has ever had a severe (life-threatening) allergic reaction to a previous dose of MCV4 or MPSV4 vaccine should not get another dose of either vaccine.
- Anyone who has a severe (life threatening) allergy to any vaccine component should not get the vaccine. *Tell your doctor if you have any severe allergies.*
- Anyone who is moderately or severely ill at the time the shot is scheduled should probably wait until they recover. Ask your doctor. People with a mild illness can usually get the vaccine.
- Meningococcal vaccines may be given to pregnant women. MCV4 is a fairly new vaccine and has not been studied in pregnant women as much as MPSV4 has. It should be used only if clearly needed. The manufacturers of MCV4 maintain pregnancy registries for women who are vaccinated while pregnant.

Except for children with sickle cell disease or without a working spleen, meningococcal vaccines may be given at the same time as other vaccines.

What are the risks from meningococcal vaccines?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of meningococcal vaccine causing serious harm, or death, is extremely small.

Brief fainting spells and related symptoms (such as jerking or seizure-like movements) can follow a vaccination. They happen most often with adolescents, and they can result in falls and injuries.

Sitting or lying down for about 15 minutes after getting the shot – especially if you feel faint – can help prevent these injuries.

Mild problems

As many as half the people who get meningococcal vaccines have mild side effects, such as redness or pain where the shot was given.

If these problems occur, they usually last for 1 or 2 days. They are more common after MCV4 than after MPSV4.

A small percentage of people who receive the vaccine develop a mild fever.

Severe problems

Serious allergic reactions, within a few minutes to a few hours of the shot, are very rare.
VACCINE INFORMATION STATEMENT

MMR (Measles, Mumps, & Rubella) Vaccine

What You Need to Know

1 Why get vaccinated?

Measles, mumps, and rubella are serious diseases. Before vaccines they were very common, especially among children.

Measles
• Measles virus causes rash, cough, runny nose, eye irritation, and fever.
• It can lead to ear infection, pneumonia, seizures (jerking and staring), brain damage, and death.

Mumps
• Mumps virus causes fever, headache, muscle pain, loss of appetite, and swollen glands.
• It can lead to deafness, meningitis (infection of the brain and spinal cord covering), painful swelling of the testicles or ovaries, and rarely sterility.

Rubella (German Measles)
• Rubella virus causes rash, arthritis (mostly in women), and mild fever.
• If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

These diseases spread from person to person through the air. You can easily catch them by being around someone who is already infected.

Measles, mumps, and rubella (MMR) vaccine can protect children (and adults) from all three of these diseases.

Thanks to successful vaccination programs these diseases are much less common in the U.S. than they used to be. But if we stopped vaccinating they would return.

2 Who should get MMR vaccine and when?

Children should get 2 doses of MMR vaccine:

- First Dose: 12-15 months of age
- Second Dose: 4-6 years of age (may be given earlier, if at least 28 days after the 1st dose)

Some infants younger than 12 months should get a dose of MMR if they are traveling out of the country. (This dose will not count toward their routine series.)

Some adults should also get MMR vaccine: Generally, anyone 18 years of age or older who was born after 1956 should get at least one dose of MMR vaccine, unless they can show that they have either been vaccinated or had all three diseases.

MMR vaccine may be given at the same time as other vaccines.

Children between 1 and 12 years of age can get a “combination” vaccine called MMRV, which contains both MMR and varicella (chickenpox) vaccines. There is a separate Vaccine Information Statement for MMRV.

3 Some people should not get MMR vaccine or should wait.

• Anyone who has ever had a life-threatening allergic reaction to the antibiotic neomycin, or any other component of MMR vaccine, should not get the vaccine. Tell your doctor if you have any severe allergies.

• Anyone who had a life-threatening allergic reaction to a previous dose of MMR or MMRV vaccine should not get another dose.

• Some people who are sick at the time the shot is scheduled may be advised to wait until they recover before getting MMR vaccine.

• Pregnant women should not get MMR vaccine. Pregnant women who need the vaccine should wait until after giving birth. Women should avoid getting pregnant for 4 weeks after vaccination with MMR vaccine.
Immunizations Addendum

Tell your doctor if the person getting the vaccine:
- Has HIV/AIDS, or another disease that affects the immune system
- Is being treated with drugs that affect the immune system, such as steroids
- Has any kind of cancer
- Is being treated for cancer with radiation or drugs
- Has ever had a low platelet count (a blood disorder)
- Has gotten another vaccine within the past 4 weeks
- Has recently had a transfusion or received other blood products
Any of these might be a reason to not get the vaccine, or delay vaccination until later.

Permanent brain damage
These are so rare that it is hard to tell whether they are caused by the vaccine.

**5 What if there is a serious reaction?**

What should I look for?
- Any unusual condition, such as a high fever or unusual behavior. Signs of a serious allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?
- Call a doctor, or get the person to a doctor right away.
- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your doctor to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at www.vaers.hhs.gov, or by calling 1-800-822-7967.

**VAERS does not provide medical advice.**

**4 What are the risks from MMR vaccine?**

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions.

The risk of MMR vaccine causing serious harm, or death, is extremely small.

Getting MMR vaccine is much safer than getting measles, mumps or rubella.

Most people who get MMR vaccine do not have any serious problems with it.

**Mild Problems**
- Fever (up to 1 person out of 6)
- Mild rash (about 1 person out of 20)
- Swelling of glands in the cheeks or neck (about 1 person out of 75)

If these problems occur, it is usually within 6-14 days after the shot. They occur less often after the second dose.

**Moderate Problems**
- Seizure (jerking or staring) caused by fever (about 1 out of 3,000 doses)
- Temporary pain and stiffness in the joints, mostly in teenage or adult women (up to 1 out of 4)
- Temporary low platelet count, which can cause a bleeding disorder (about 1 out of 30,000 doses)

**Severe Problems (Very Rare)**
- Serious allergic reaction (less than 1 out of a million doses)
- Several other severe problems have been reported after a child gets MMR vaccine, including:
  - Deafness
  - Long-term seizures, coma, or lowered consciousness

**The National Vaccine Injury Compensation Program**

The National Vaccine Injury Compensation Program (VICP) was created in 1986.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling 1-800-338-2382 or visiting the VICP website at www.hrsa.gov/vaccinecompensation.

**7 How can I learn more?**

- Ask your doctor.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO) or
  - Visit CDC’s website at www.cdc.gov/vaccines

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**Vaccine Information Statement (Interim)**

**MMR Vaccine**

4/20/2012

42 U.S.C. § 300aa-26
PNEUMOCOCCAL POLYSACCHARIDE VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 Pneumococcal disease

Pneumococcal disease is caused by Streptococcus pneumoniae bacteria. It is a leading cause of vaccine-preventable illness and death in the United States. Anyone can get pneumococcal disease, but some people are at greater risk than others:

- People 65 years and older
- The very young
- People with certain health problems
- People with a weakened immune system
- Smokers

Pneumococcal disease can lead to serious infections of the:

- Lungs (pneumonia),
- Blood (bacteremia), and
- Covering of the brain (meningitis).

Pneumococcal pneumonia kills about 1 out of 20 people who get it. Bacteremia kills about 1 person in 5, and meningitis about 3 people in 10.

People with the health problems described in Section 3 of this statement may be more likely to die from the disease.

2 Pneumococcal polysaccharide vaccine (PPSV)

Treatment of pneumococcal infections with penicillin and other drugs used to be more effective. But some strains of the disease have become resistant to these drugs. This makes prevention of the disease, through vaccination, even more important.

Pneumococcal polysaccharide vaccine (PPSV) protects against 23 types of pneumococcal bacteria, including those most likely to cause serious disease.

Most healthy adults who get the vaccine develop protection to most or all of these types within 2 to 3 weeks of getting the shot. Very old people, children under 2 years of age, and people with some long-term illnesses might not respond as well, or at all.

Another type of pneumococcal vaccine (pneumococcal conjugate vaccine, or PCV) is routinely recommended for children younger than 5 years of age. PCV is described in a separate Vaccine Information Statement.

3 Who should get PPSV?

- All adults 65 years of age and older.
- Anyone 2 through 64 years of age who has a long-term health problem such as:
  - heart disease
  - lung disease
  - sickle cell disease
  - diabetes
  - alcoholism
  - cirrhosis
  - leaks of cerebrospinal fluid or cochlear implant
- Anyone 2 through 64 years of age who has a disease or condition that lowers the body’s resistance to infection, such as:
  - Hodgkin’s disease
  - lymphoma or leukemia
  - kidney failure
  - multiple myeloma
  - nephrotic syndrome
  - HIV infection or AIDS
  - damaged spleen, or no spleen
  - organ transplant
- Anyone 2 through 64 years of age who is taking a drug or treatment that lowers the body’s resistance to infection, such as:
  - long-term steroids
  - certain cancer drugs
  - radiation therapy
- Any adult 19 through 64 years of age who:
  - is a smoker
  - has asthma

PPSV may be less effective for some people, especially those with lower resistance to infection.
Immunizations Addendum

But these people should still be vaccinated, because they are more likely to have serious complications if they get pneumococcal disease.

Children who often get ear infections, sinus infections, or other upper respiratory diseases, but who are otherwise healthy, do not need to get PPSV because it is not effective against those conditions.

4 How many doses of PPSV are needed, and when?

Usually only one dose of PPSV is needed, but under some circumstances a second dose may be given.

- A second dose is recommended for people 65 years and older who got their first dose when they were younger than 65 and it has been 5 or more years since the first dose.
- A second dose is recommended for people 2 through 64 years of age who:
  - have a damaged spleen or no spleen
  - have sickle-cell disease
  - have HIV infection or AIDS
  - have cancer, leukemia, lymphoma, multiple myeloma
  - have nephrotic syndrome
  - have had an organ or bone marrow transplant
  - are taking medication that lowers immunity (such as chemotherapy or long-term steroids)

When a second dose is given, it should be given 5 years after the first dose.

5 Some people should not get PPSV or should wait

- Anyone who has had a life-threatening allergic reaction to PPSV should not get another dose.
- Anyone who has a severe allergy to any component of a vaccine should not get that vaccine. Tell your provider if you have any severe allergies.
- Anyone who is moderately or severely ill when the shot is scheduled may be asked to wait until they recover before getting the vaccine. Someone with a mild illness can usually be vaccinated.
- While there is no evidence that PPSV is harmful to either a pregnant woman or to her fetus, as a precaution, women with conditions that put them at risk for pneumococcal disease should be vaccinated before becoming pregnant, if possible.

6 What are the risks from PPSV?

About half of people who get PPSV have mild side effects, such as redness or pain where the shot is given.

Less than 1% develop a fever, muscle aches, or more severe local reactions.

A vaccine, like any medicine, could cause a serious reaction. But the risk of a vaccine causing serious harm, or death, is extremely small.

7 What if there is a severe reaction?

What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell the doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your provider to report the reaction by filling a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

8 How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call 1-800-232-4636 (1-800-CDC-INFO) or
  - Visit CDC’s website at www.cdc.gov/vaccines.

PPSV (10/6/09) Vaccine Information Statement
Polio Vaccine
What You Need to Know

1. What is polio?
Polio is a disease caused by a virus. It enters the body through the mouth. Usually it does not cause serious illness. But sometimes it causes paralysis (can’t move arm or leg), and it can cause meningitis (irritation of the lining of the brain). It can kill people who get it, usually by paralyzing the muscles that help them breathe.

Polio used to be very common in the United States. It paralyzed and killed thousands of people a year before we had a vaccine.

2. Why get vaccinated?
Inactivated Polio Vaccine (IPV) can prevent polio.

History: A 1916 polio epidemic in the United States killed 6,000 people and paralyzed 27,000 more. In the early 1950’s there were more than 25,000 cases of polio reported each year. Polio vaccination was begun in 1955. By 1960 the number of reported cases had dropped to about 3,000, and by 1979 there were only about 10. The success of polio vaccination in the U.S. and other countries has sparked a world-wide effort to eliminate polio.

Today: Polio has been eliminated from the United States. But the disease is still common in some parts of the world. It would only take one person infected with polio virus coming from another country to bring the disease back here if we were not protected by vaccine. If the effort to eliminate the disease from the world is successful, some day we won’t need polio vaccine. Until then, we need to keep getting our children vaccinated.

3. Who should get polio vaccine and when?
IPV is a shot, given in the leg or arm, depending on age. It may be given at the same time as other vaccines.

Children
Children get 4 doses of IPV, at these ages:
- A dose at 2 months
- A dose at 4 months
- A dose at 6-18 months
- A booster dose at 4-6 years

Some “combination” vaccines (several different vaccines in the same shot) contain IPV.
Children getting these vaccines may get one more (5th) dose of polio vaccine. This is not a problem.

Adults
Most adults 18 and older do not need polio vaccine because they were vaccinated as children. But some adults are at higher risk and should consider polio vaccination:
(1) people traveling to areas of the world where polio is common,
(2) laboratory workers who might handle polio virus, and
(3) health care workers treating patients who could have polio.

Adults in these three groups:
- who have never been vaccinated against polio should get 3 doses of IPV:
  - Two doses separated by 1 to 2 months, and
  - A third dose 6 to 12 months after the second.
- who have had 1 or 2 doses of polio vaccine in the past should get the remaining 1 or 2 doses.
It doesn’t matter how long it has been since the earlier dose(s).

- who have had 3 or more doses of polio vaccine in the past may get a booster dose of IPV.

Your doctor can give you more information.

4 Some people should not get IPV or should wait.

These people should not get IPV:

- Anyone with a life-threatening allergy to any component of IPV, including the antibiotics neomycin, streptomycin or polymyxin B, should not get polio vaccine. Tell your doctor if you have any severe allergies.

- Anyone who had a severe allergic reaction to a previous polio shot should not get another one.

These people should wait:

- Anyone who is moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting polio vaccine. People with minor illnesses, such as a cold, may be vaccinated.

Ask your doctor for more information.

5 What are the risks from IPV?

Some people who get IPV get a sore spot where the shot was given. IPV has not been known to cause serious problems, and most people don’t have any problems at all with it.

However, any medicine could cause a serious side effect, such as a severe allergic reaction or even death. The risk of polio vaccine causing serious harm is extremely small.

6 What if there is a moderate or severe problem?

What should I look for?

- Look for any unusual condition, such as a serious allergic reaction, high fever, or unusual behavior. If a serious allergic reaction occurred, it would happen within a few minutes to a few hours after the shot. Signs of a serious allergic reaction can include difficulty breathing, weakness, hoarseness or wheezing, a fast heart beat, hives, dizziness, paleness, or swelling of the throat.

What should I do?

- Call a doctor, or get the person to a doctor right away.

- Tell your doctor what happened, the date and time it happened, and when the vaccination was given.

- Ask your doctor to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS website at www.vaers.hhs.gov or by calling 1-800-822-7967.

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7 The National Vaccine Injury Compensation Program

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Vaccine Information Statement (Interim)  
Polio Vaccine  
11/8/2011  
42 U.S.C. § 300aa-26