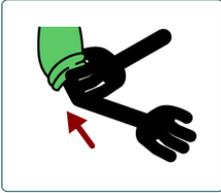


Getting My Vaccine

- | | | | |
|---|---|--|-------------------------------------|
| | | | <input checked="" type="checkbox"/> |
| 1 |  | Check in at the vaccine clinic, pharmacy, or doctor's office | <input type="checkbox"/> |
| 2 |  | Follow a helper to a room | <input type="checkbox"/> |
| 3 |  | Sit down and roll up sleeve | <input type="checkbox"/> |
| 4 |  | Nurse cleans arm with a wipe | <input type="checkbox"/> |
| 5 |  | Nurse will give the shot | <input type="checkbox"/> |

Getting My Vaccine

6



Nurse applies a bandage



7



I might be asked to wait

8



Time to leave

9



My body is stronger!

10



To stay healthy
I will keep washing my hands!