



Polio Survivors Serving Others

Information & Inspiration
For All Polio Survivors and Their Families

The PA Polio Network

www.polionetwork.org

April 2024

Our Mission:

To Be in Service Providing Information to Polio Survivors, Post Polio Support Groups, Survivor's Families and their Caregivers.

Inside this Issue:

April 24th - 30th: It is the week that honors the miracle of modern vaccines all over the US and abroad. Polio survivors all over the world wait for and support the eradication of this disease.

- Here in the US, National Infant Immunization Week (NIIW) “highlights the importance of protecting infants and young children from vaccine-preventable diseases. This year, a primary focus is to ensure families stay on track for their children’s well-child visits and routinely recommended vaccinations.” (For us, this begins with children having the polio vaccine).

- World Immunization Week – a message from:

Rotary International:

“We applaud the courage, care, and tenacity of polio vaccinators who travel house-to-house to make sure every child is vaccinated. To end Polio for good means making sure vaccines are delivered to the communities that need them, whether by car, train, or even a bicycle! “

The World Health Organization:

“We can make it possible for everyone to benefit from the life-saving power of vaccines.”

Colds . . . COVID . . . Flu . . . RSV - How do I know when to call my doctor?:

Marny K. Eulberg, MD honors World Immunization Week with an article that updates this information with the latest on the vaccines and their ability to reduce serious illness and hospitalization.

Getting Vaccinated as an Adult: What Should I Know? What vaccines do I really need? What will they cost? Where do I get them? It’s all pretty confusing. The Vaccine Education Center of the Children’s Hospital of Philadelphia is a credible resource for BOTH pediatric and adult vaccines. We have their new article that answers some of these questions.

“Kids Do Say the Darndest Things”: Art Linkletter’s quote is the perfect description for our latest children’s book reviews. In honor of National Infant Immunization Week and World Immunization Week, we went back to our youngest vaccine advocates, Avery and Ariana for another children’s book review. Joining them for the first time is Colin. We gave them highly recommended, parent approved book choices (by credible sources). Both Dylan’s Big Surprise at the Doctor by Kishma Anthony and The Germ Patrol by Neil Shulman MD, Todd Stolp MD and Robin Voss received two thumbs up reviews by our critics.



The honest reviews from these young advocates are a great resource for gift giving. (Our growing list of Book Reviews are easily available on our website under Articles/Resources – [Book Reviews](#).)

She's a Grateful Polio Survivor: Rena DeRosa has become just that. Her honest story speaks of will and determination not being enough. She wanted to start really living again . . . and discovered she needed to make changes in her daily life. When it comes to advocating for the polio vaccine, Rena is no longer timid.

Kids Say
The Darndest
Things

Involving Children In This Message Has Been Fun.

Their honesty about what they learn has fascinated us (and their parents).

In one of her reviews, Avery discovered she shared “grit” with Jonas Salk:

“Have you ever met a kid who said they wanted to make the world a better place? Have you ever said that? Maybe you have qualities like Jonas Salk!

We talk a lot about having grit in our school. Jonas was a kind and curious kid. He was a dreamer; a believer and he had GRIT. His friends knew him as a kid who would play fair. He read a lot of books and was said to ‘think differently’. ‘I understood how he may have felt. I sometimes get told that I think outside the box.’ ”

We have started donating these books to libraries - with the reviews in hand. The feedback from the librarians has been warm and they have accepted our gifts with a smile. In addition to this month’s review, Avery and Ariana have written about:

- [Ava The Antibody Explains](#) by Andrea Cudd Alemanni,
- [Kelly Gets A Vaccine](#) by Lauren Block MD MPH and Adam E. Block PhD and
- [The Polio Pioneer - Jonas Salk and the Polio Vaccine](#) by Linda Elovitz Marshall

If you like the idea of purchasing and/or donating these books, contact us.
We’re happy to help.



**WORLD
IMMUNIZATION
WEEK** 24-30 APRIL



**END
POLIO
NOW**

Is it Allergies? A Cold? COVID ? Influenza? RSV? How do I know when to call my physician?

By [Marny K. Eulberg, MD](#)



Every fall, going into winter, people who have sniffles, coughs, and/or fever ask themselves and their health care providers, “What causes that?” or “What is this thing that is making me feel sick?”. Fortunately, after the first killing frost, many of the allergies to plants go away until next growing season, but indoor allergens can bother people all year. In 2020 COVID-19 got thrown into the mix. And then in 2023 & 2024 RSV (respiratory syncytial virus) got added to the list. Colds, flu, allergies, COVID and RSV may have many of the same symptoms. And yes, it is even possible to have allergies and COVID, or flu and COVID, or allergies and the flu, or the so called “triple-demic” of flu, COVID and RSV all simultaneously. COVID seems to be the only malady out of this list that can cause a person to have a new loss of the sense of taste or smell, but not all people infected with COVID lose their sense of taste or smell. Therefore, no one can say with certainty that because you can still taste and smell that you do not have COVID !

RSV used to be thought of as only a childhood disease, but now we’ve learned that adults can also become ill from RSV. RSV is a common “cold-like” infection in children (almost all children will have had a RSV infection by age two years). Symptoms of RSV usually include runny nose, decrease in appetite, sneezing, coughing, fever, and possible wheezing. Most RSV symptoms go away on their own in 1 to 2 weeks, but RSV *can* be serious, especially in those less than 2 years old and in adults and infants with impaired respiratory function. They may need hospitalization to treat low oxygen levels or dehydration.

If the problem is only due to allergies it is very, very unlikely that the person affected will have a fever but they often have bothersome sneezing, stuffy or runny nose, and itchy eyes. The [National Foundation of Infectious Diseases](#) put together a chart of possible diagnoses (see page 2) for those with respiratory symptoms to help determine whether a person might have a cold, COVID, Influenza or RSV.

The best preventatives for COVID, flu, and RSV are the vaccines that are now easily available and in the US, the cost is covered by Medicare. Additionally, frequent handwashing, wearing face coverings when outside one’s home, and maintaining a distance from others that do not live in your household can be very effective. And, there is the old rule that applies whether it be colds, COVID, Flu or RSV - if you are sick? Stay home!

These hygienic measures will decrease your risk of getting and spreading these contagious respiratory infections.

There *are* vaccines that can prevent and/or decrease the severity of Influenza, COVID, and RSV. Since the vast majority of us in the US who had polio are 65 years or older, it is generally advised that we be given these vaccines including the “high dose” flu vaccine. Note: This is not based on the fact that we had polio but is purely based on our age. The “high-dose” vaccine has four times the amount of flu antigen that is in the flu vaccine given to younger people to each of 4 different flu viruses (hence the term “quadrivalent”) that are expected to be the cause of influenza in any given year.

continued . . .

Is it Allergies, a Cold, Influenza, COVID or RSV? (continued . . .)

According to the New England Journal of Medicine, the high dose flu vaccine was shown to be 24% more effective at preventing flu in persons 65 and older than the standard flu vaccine. Nevertheless, *no* flu vaccine is 100% effective at protecting recipients from getting the flu if they are exposed to someone with influenza. Reminder: It takes two weeks after you've had the vaccine for it to be fully effective. In the past several years, flu vaccines have been shown to be about 40-50% effective.

Those who should *not* get the flu vaccine are those with severe allergies to eggs and those who are sick with fever (or any suspected infection including possible COVID). Persons who are sick with fever or have been recently exposed to COVID, flu, or RSV should delay getting the vaccine primarily to avoid exposing the vaccinators and staff to whatever you may have. Initial treatment for colds, flu, COVID, and RSV are pretty much the same - fluids, rest, and symptomatic treatment such as acetaminophen (Tylenol) or ibuprofen (Advil, etc.) for treatment of fever and body aches. Stay home to minimize the risk of you transmitting these respiratory viruses to others, with special avoidance of those with impaired immunity and infants under one year of age.

Can I Have Flu and COVID-19 At The Same Time?

Yes. It is possible to have the flu, as well as other respiratory illnesses, and COVID-19 at the same time. This is what happened with the "triple-demic" (when Flu, RSV, and COVID-19 cases collide). Some of the symptoms of flu, COVID-19, and RSV are similar making it hard to tell the difference between them based on symptoms alone. Diagnostic testing can help determine if you are sick with flu, COVID-19, or RSV.

Should vaccines be given to someone who feels ill? What if they have a fever?

No. Vaccination should ideally be deferred (postponed) for people who have a fever or severe respiratory symptoms. While mild illness is not a contraindication to vaccination, vaccination visits for these people should be postponed to avoid exposing healthcare personnel and other patients to the viruses causing these illnesses.

When scheduling or confirming appointments for vaccination, patients should be instructed to notify the provider's office or clinic in advance if they currently have or have developed any symptoms of COVID-19, flu, or RSV.

Additionally, a prior infection with any of these viral illnesses does not protect someone from future infections, but the immunity resulting from the infection may give one protection from that same disease for a year or two. The best way to prevent these illnesses is to get vaccinated following the most recent vaccination schedule.

When should someone call their Healthcare Professional, go to Urgent Care, or to the Emergency Room?

Call your healthcare professional anytime you are concerned.

continued . . .

Is it Allergies, a Cold, Influenza, COVID or RSV? (continued . . .)

Consider going to an urgent care facility if you have a fever over 102 degrees Fahrenheit (38.9 C), are having trouble breathing including being shorter of breath than usual with ordinary activities, have had a fever over 101 degrees Fahrenheit (38.3 C) for more than 2-3 days or symptoms other than upper respiratory symptoms such as chest pain, urinary symptoms, or problems eating or drinking.








It's time to go the ER – if you have severe shortness of breath, chest pain, fever lasting more than 3-5 days or over 103, severe pain anywhere, impaired level of consciousness, Bleeding not related to a minor cut, or passing out.

SOURCE: CDC

www.cdc.gov/rsv/index.html

HOW TO TELL THE DIFFERENCE BETWEEN FLU, RSV, COVID-19, AND THE COMMON COLD

Common symptoms may include cough, headaches, sneezing, runny nose, and congestion. Different symptoms may include:

	COLD	FLU	COVID-19	RSV
 ACHES	XX	XXX	XX	X
 DIFFICULTY BREATHING	X	X	XXX	XX
 FATIGUE	XX	XXX	XXX	X
 FEVER	X	XXX	XX	XX
 LOSS OF TASTE OR SMELL	X	X	XX	X
 SORE THROAT	XXX	XX	XXX	X
 WHEEZING	X	X	X	XXX

Legend: X (Green) Rarely, X (Yellow) Sometimes, X (Red) Often

Image Source: National Foundation of Infections Diseases

Getting Vaccinated as an Adult: What Should I Know?

Published in March, 2024 Parents PACK, a newsletter for the public from the Vaccine Education Center at CHOP

“People are generally aware that children need vaccines, but until relatively recently, many adults often did not consider that they might also need vaccines. If we were trying to find something positive that emerged following the COVID-19 pandemic, we might point to an increased awareness about adult vaccines. But, unfortunately, the public health and medical infrastructure for adult vaccines is not as well developed as that for children. So, where does that leave adults trying to make sure they are protected against vaccine-preventable diseases?

What Vaccines Do I Need?

Adults should get in the habit of asking their primary healthcare providers whether they need any vaccines at every visit. Of course, not all adults regularly go to their primary doctor. So, some other options can include:

Changing your habits to include at least one annual visit to your primary care doctor.

This approach will ensure not only that your vaccination needs are met, but also that you have bloodwork and other aspects of your health checked on a regular basis.

Asking other healthcare providers that you see.

This can include specialists that you visit more regularly, like gynecologists, pulmonologists, cardiologists, or those being seen during illnesses or injuries, such as urgent care or emergency room physicians. However, be aware that this approach may be limited in its effectiveness. Because, for example, while these providers may offer guidance based on a specific condition or situation, such as getting a pneumococcal vaccine if you have asthma or a tetanus vaccine if you are being treated for a wound, they may not be well-versed on your complete medical history or the immunization schedule in general, so you could miss some opportunities for protection or get vaccines that are not of much benefit. Immunize.org offers a useful tool to help healthcare providers determine a patient’s vaccine needs; “Before You Vaccinate Adults, Consider Their ‘H-A-L-O!’” [bit.ly/consider-HALO] can help these providers more quickly identify vaccines that you should consider.

Using tools and information offered by groups focused on vaccination.

For example, the Centers for Disease Control and prevention (CDC) offers a free, online vaccine assessment tool [bit.ly/adult-vax-quiz]. Likewise, information about adult vaccines is offered by other groups, including this Immunize.org sheet [bit.ly/adult-vax-info] and this Vaccine Education Center (VEC) booklet [bit.ly/adult-vax-booklet]. Information of this type can prepare you to ask pertinent questions and have informed conversations with a healthcare provider.

TRIVIA CORNER

Who should get the shingles vaccine?

- A. All adults 50 years and older who have not had the vaccine.
- B. All adults 40 years and older who have not had the vaccine
- C. All adults 60 years and older who have not had the vaccine
- D. All adults 30 years and older who have not had the vaccine.

- Immunize.org also has several Q&A sheets related to specific conditions [bit.ly/vax-resources], including diabetes, pregnancy, lung disease, and more. However, one important consideration when seeking information from outside groups is to ensure that it is grounded in science and based on accepted medical standards. You can ask your healthcare provider for good sources of information or check the: “Resources for Evaluating Information” [bit.ly/eval-info-resources] or the “Vaccine Websites” [bit.ly/vaccine-websites] pages of the VEC’s website.

A note about vaccination records

When you talk to healthcare providers about which vaccines you need, they may ask about your vaccination history. If you have old immunization records, take them to healthcare visits with new providers or keep a picture or list with you in the event you require emergency care, such as for an accident causing a wound.

If you are not sure where your record is, review this list of “Tips for Locating Old Immunization Records” [bit.ly/vaccine-records] offered by Immunize.org. Regardless of whether you locate old immunization records, it is important to keep a list of previous vaccinations in the same way that you may keep a list of your medications — even if you start a new list with your next vaccination. You will want to record the date you were vaccinated, where you got the vaccine, and which vaccine you received, including which disease or diseases it protects against. It is worth having the healthcare provider confirm the vaccine-specific information since sometimes there is more than one type of the same vaccine.

Where Can I Get Vaccinated?

After figuring out which vaccines you need, your next question may be where you can get them. In some cases, your primary care provider will offer vaccines, but if they do not, you have some other options:

Local pharmacy

Today, many pharmacists administer vaccines; however, two things are important to remember.

- First, you should confirm that your doctor agrees you need a particular vaccine and it’s safe to get based on your medical history.
- Second, you should inquire whether the pharmacy you plan to go to has the vaccine you need and whether you need an appointment. It is also important to ask whether you need additional doses and, if so, what amount of time should separate the doses.

Local Health Department

Your local public health center may also offer the vaccines that you need. To check, contact them and also find out their hours, location, and whether you need an appointment. You can find your state health department immunization office on the “State Immunization Websites” page [bit.ly/state-websites] on Immunize.org, and they should be able to provide information about the health center located near you. You can also use the resources on the “Where To Get Vaccinated” page [bit.ly/get-vaccines] on the vaccineinformation.org website.

Immunization Clinics

For annual vaccines, like influenza, you may hear about clinics being offered by public health officials, immunization coalitions, churches, non-profit groups, employers or nearby health systems. Watch for announcements around your neighborhood, from news sources or from your social network.

Travel Medicine Clinics

If you need vaccines because you are traveling internationally, you may need to locate a travel medicine specialist since vaccines that are not routinely recommended are typically not stocked by other types of healthcare providers. Travel medicine specialists offer a wealth of information beyond your vaccines needs.

By discussing details of your trip, they will also typically be able to provide tips for being prepared during travel and what to watch for after travel.

Both the International Society of Travel Medicine [bit.ly/ISTM-clinic-directory] and the American Society of Tropical Medicine and Hygiene [bit.ly/consultants-directory] offer online directories for locating these medical specialists.

When you get vaccines at any place other than your primary care provider's office, two considerations are important:

1. Get details from your provider regarding whether there is a particular brand or dose of the vaccine that you should get. For example, since several influenza vaccines are available, your healthcare provider may recommend a particular type, such as a high-dose version if you are an older adult.
2. After getting vaccinated, *it is important* to promptly provide your healthcare provider with the details, so the vaccination becomes part of your medical record.

What Will My Vaccines Cost?

Another common consideration is the cost of vaccines. In some cases, vaccines may be free.

Your situation will depend on the type of health coverage you have, why you need the vaccines, and where you get them. For example, if you need vaccines because of an upcoming international trip, the vaccines may not be covered by your health insurance even though routine vaccines are covered.

If you are without health insurance, you may be able to get discounted or free vaccines by going to a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC). We recommend inquiring about the cost of a vaccination when you make your appointment, and if there will be a fee, you may want to check for alternative options that offer better pricing. Vaccinate Your Family offers a useful online tool for determining how to afford vaccines [bit.ly/paying-for-vax].

In Summary

We hope that the resources in this article can assist you in traversing the current adult vaccine landscape. And, we also hope that over time, the infrastructure for adult vaccines matures, making the adult vaccine experience more seamless.”

Published (with permission) by:
The Vaccine Education Center at the Children's Hospital of Philadelphia
(Providing Vaccine Information for both Children AND Adults)
[March, 2024](#)

TRIVIA ANSWER

The correct answer is A.

All adults 50 years of age and older should receive the shingles vaccine if they have not had a dose previously.

Go to vaccine.chop.edu/trivia to play Just the Vax, the Vaccine Education Center's Trivia Game, where you can find this question and others like it.



Contact Us: www.PACK@chop.edu

Learn more: www.vaccine.chop.edu/parents

Adult Vaccines: www.chop.edu/centers-programs/vaccine-education-center/age-groups-and-vaccines/adults



The Crucial Role Of Vaccines As We Age

Vaccinations play a pivotal role in safeguarding older adults. Our ability to fight off infections and maintain our immune system declines as we age. As we age, many of us are also in situations where contagious conditions are easily spread. This creates situations where vaccine use is critical for us to stay healthy and live fully.

- Vaccines are a *safe* and *effective* way for older adults to build immunity against infectious diseases, reducing the chances of serious illness, hospitalization, and complications.

We should *all* consult with our healthcare professionals when deciding which vaccine we should get and when.

- None of us should rely on rumors, misinformation and conspiracy theories spread by social media, friends, and others.

Vaccine Resources (for both Pediatric AND Adult Vaccines):

Immunize.org	(651) 647-9009	www.immunize.org
Vaccine Education Center - CHOP	(215) 590-9990	www.vaccine.chop.edu
Vaccinate Your Family -	(202) 783-7034	info@vaccinateyourfamily.org

Thank you [BCHIP](#)

Rena (Martha L.) DeRosa

An Informed and Grateful Polio Survivor

I never thought much about having had polio when I was five as it was a very mild case that affected only my right leg. I remember my father would rub/massage it with cocoa butter every night at bedtime. Even though I had already had the virus, my mom made sure I got the polio vaccine (the little purple sugar cube) when it came out two years later.

I wore tie shoes with a lift in the heel of my right shoe until I was a teenager. I was very vain and didn't want anyone, especially boys, to know I had a limp from the polio and never put lifts in my shoes again. I wanted to be like all the other girls and wear heels, sandals, and many other "pretty" shoes. I taught myself to walk without a limp and managed to accomplish this into my fifties as I went through high school, my 20's, getting married and raising children.

In my early 60's I started to notice how I would limp by the end of the day. I figured – "Oh I just, did too much today". The next morning, I was right back at it. "Come on Rena, just rest more at the end of the day. There's nothing wrong with me". They say that's total denial. Truthfully, I didn't understand what was happening to me. I'm in my 70's, retired and enjoying life near the shore in Delaware. I've taken cruises, traveled around the world and love watching my grandchildren growing up.

Over the years, I started noticing that my right hand would shake. I would tell myself "I'm just getting old". Sometimes, when I was carrying a plate from a buffet table to our table, my right hand/arm would shake to the point I would almost drop the plate. My solution? Start using two hands. I mentioned this to my sister-in-law (also a polio survivor who wears braces on both legs). She went to Polio Symposiums every year and as a result, has learned a lot about what could happen to us. When she suggested it could be related to my having had polio, I thought maybe she didn't know what she was talking about. "I had polio when I was little - I don't have polio, now." Once again, I was being vain. I definitely was WRONG.

Then in 2019 the whole world saw what COVID virus could do. The world shut down, no one left their houses and if you did go out, we wore a mask. We washed our hands a hundred times a day, and sanitized everything that came into the house. We didn't see our children or grandchildren for 2 years. Along with the rest of the world, we waited for everyone to get the vaccine and then the boosters. We had the "senior" flu shot and took each day at a time.

Then in October 2021, I got pneumonia. The X-rays showed four nodules in my upper and lower right lung along with a small pleural effusion (a buildup of fluid). I was very tired and out of breath. I had doctor's video appointments, took the prescribed medication, and over the next 2 - 3 months, had multiple x-rays. My doctor asked if I had pneumonia when I was

continued . . .



younger while I had polio. None of my family members had a memory of my having pneumonia or lung problems. When I mentioned these things to my sister-in-law, she told me about the "PA Polio Survivor" [website](#) and monthly newsletter. Now, I thank my sister-in-law every day.

My eyes are open.

[Bruno Bytes](#) - Thank you Dr. Bruno for opening my eyes to being a Polio Survivor;
The monthly [Newsletters](#);
Learning about "[Upside Down Polio](#)", and
[The Encyclopedia](#) –

I can research anything.

I understand why I would be so sick after anesthesia & now have an [ID card](#) with me all the time. I HAD polio and now I'm living with the late effects of that terrible virus. There's no denying it. I put lifts back in my right shoes and once again wear tie shoes with better support. I'm learning how to slow down, and walk more slowly, without sudden stops or turns. I know my body and am learning how to deal with it.

I'm especially fascinated by having learned that Polio has affected the muscles in my whole body and I now understand Polio survivors often report new muscle weakness in their "good" limbs and no change in the Polio-affected ones. Now, when I go to the gym, I move the muscles at the lowest levels on all the machines. I realize that it's more important to keep them moving before there's pain - so I can keep moving when I get home.

I'm now aware of things I ignored in the past. I have muscle pain in my left leg (under the knee cap) when I walk more than 15 minutes straight. I can kneel with no problem. I can't bend over for too long or I get back pain. I realize that taking the time to learn my body and what it can and cannot do is vital.



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continued . . .

I ask myself – What would I say if I met someone who didn't want to vaccinate their child for polio? I would tell them:

Please don't take the chance OR risk their lives.

I lived through the Polio Epidemics and thank God I had only a mild case. Talk to your doctor or your child's pediatrician (or both) - Why take the RISK?

Do you want to see them in a brace or two braces ? Even worse, see your child unable to breathe and looking at them in an iron lung, totally dependent on a machine that keeps the muscles going so they can take that next breath?

Don't you want them to be able to breathe on their own, be able to run and play with all the other children? Don't you want them to live a normal life?

I am NOW a Post-Polio Survivor.

Rena (Martha L.) DeRosa



You can see Rena's story along with more than 100 others on the [Survivor Story](#) page of our website.



THANK you for your kind words and generous [donations](#).

They are the inspiration we need to continue our work.

Always feel free to contact us.

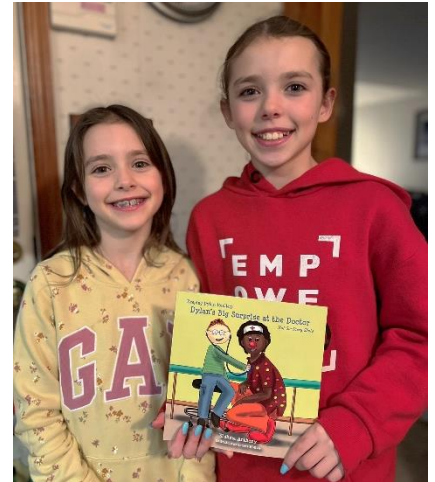
Dylan's Big Surprise at the Doctor

By: Kishma Anthony
A Book Review by Avery and Ariana

We're in 6th and 3rd grade.

We really liked this book. It was upbeat and made us feel good. We know we are still young, but this book showed us that feeling comfortable at the doctors, dentists, etc., has a big effect on you. They want you to feel safe.

This is a good book for kids to learn that the specialists care about us and that they are there to help us. My Mom tries for us to see the same doctor, so they get to know us, and we get to know them. It gets us more and more comfortable with them, each time we must go.



Remember, going to the doctor doesn't have to be scary.

We give this book two thumbs up!
Avery and Ariana



“Dylan was not looking forward to getting shots at his upcoming doctor’s visit. His nerves had gotten the best of him and there was only one hope for a tantrum-free visit: his favorite nurse. Nurse Jennie!” [Kishma Anthony](#)



“Dylan, like many kids his age, was very reluctant to go to the doctor, because he knew it was a day for shots. He tried everything to keep from going but ended up right there, in the lobby, waiting his turn. He really hoped that his favorite nurse would be there.”

[Image Source](#)



“Follow along with Dylan as he goes to the doctor. The staff at the doctor’s office has planned a special surprise. Dylan will soon learn that he is not alone and that there is no reason to be fearful of the not-so-scary-shots.”

[Image Source](#)

The Germ Patrol

by Neil Shulman MD, Todd Stolp MD and Robin Voss

A Book Review by Colin

I'm Colin and I am in the 4th grade. I liked reading the Germ Patrol.

There are three reasons I thought The Germ Patrol would help kids get over their fear of vaccines.

It gives a lot of interesting facts about how the Germ Patrol goes through your body and gets the viruses out. It is very funny.

I liked how the grandma put on a jet pack and then went jet packing up the tree to the main character, Trudy. She told Trudy that getting a shot is not going to hurt you.

It tells you about how the Germ Patrol can't do their job if you don't get the vaccines. Because if you don't, then you get sick and none of us like getting sick!

I like learning new stuff. I learned about white blood cells. When I saw those words I was like "huh?" and I kept wondering about what it was - so I kept reading the book. I found out what it means. They're important to your body and stuff so you don't get sick as often.

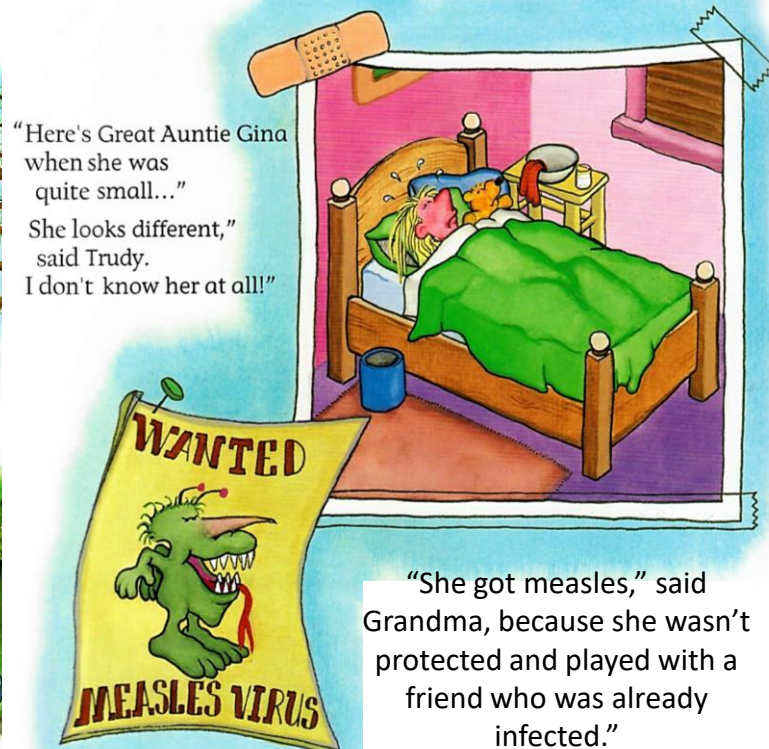
Overall I think [The Germ Patrol](#) gives facts in funny and creative ways to keep the reader hooked in the book. I think the reading level should be 2nd to third grade and up – it has a lot of hard words.



I give this book two "Thumbs Up"
Colin



"So when time for her check-up and shots would get near, she would climb to her tree house and just disappear. But her grandma was smart, as most grandmas are. And her grandma could tell Trudy hadn't gone far."



"She got measles," said Grandma, because she wasn't protected and played with a friend who was already infected."

Measles can make our eyes hurt and turn red. Your fever's so high ice cream melts on your head!"



Who Helps Those Who are Experiencing Post-Polio?

This video from [Polio Australia](#) explains the value of a multi-disciplinary approach that is effective in treating polio survivors.

This is the 10th in their outstanding video [series](#). All 10 videos in this series and more from [Polio Australia](#) are available on the [Living with Post-Polio Syndrome](#) page of our website.



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