

Notification to close at-risk and indirect at-risk contacts (for children)

Date:

Dear Sir, Dear Madam,

Your child has been in contact with a person who has whooping cough. Because, in case your child becomes ill, the disease could have a more severe course or it could be passed on to a person at higher risk of a more severe course of the disease, please take this notification to your selected personal physician, who will:

- check your child's records of whooping cough vaccination and vaccinate them if necessary;
- prescribe the appropriate medication for protection.

If, despite taking the medication, signs of whooping cough (typical cough, runny nose or fever) still appear within the next 3 weeks, you should consult your selected physician again.

Make sure you bring your health insurance card with you.

With kind regards,

Name and surname of the contact person