

were randomized to either the slow injection–aspiration–slow withdrawal (standard) immunization technique or rapid immunization without aspiration (intervention) in a randomized-controlled trial conducted by [Ipp, Taddio, Sam, et al \(2007\)](#). Infants in the intervention group ($n = 56$) had lower MBPSs, were less likely to cry, cried for a shorter time, and had lower pain scores when scored by both parents and physicians using a Visual Analogue Scale (VAS).

- Vaccine choice and vaccine order
- A randomized-controlled trial by [Ipp, Cohen, Goldbach, et al \(2004\)](#) compared the immediate pain response to two different measles, mumps, and rubella (MMR) vaccine products. Forty-nine 12-month-old children were randomized to receive either Priorix or MMR-II for their initial MMR vaccine. Pain response was measured using both VAS and MBPS and scored independently by a physician, a parent, and a third observer. Children receiving Priorix had substantially lower pain scores (VAS: 15 versus 33, $p = 0.003$; MBPS: 3 versus 5, $p = 0.03$).
- In a similar trial, [Ipp, Parkin, Lear, et al \(2009\)](#) randomized 120 2- to 6-month-old infants to receive either DTaP-Hib vaccine followed by PCV, or PCV followed by DTaP-Hib. Infants who received DTaP-Hib prior to PCV had lower MBPS and VAS scores compared to infants who received PCV first (MBPS: