7.6 versus 8.2, $p = 0.037$; VAS: 4.2 versus 5.6, $p = 0.003$). When administered first, infants who received DTaP-Hib also cried for a shorter time compared to infants who received PCV first.

- Knutsson, Jansson, and Alm (2006) randomized 295 18- to 24-month-old children (average age 19 months old) to receive either Priorix or MMR-II in a double-blind study. Pain was assessed using the Children's Hospital Eastern Ontario Pain Scale (CHEOPS) and VAS. Children receiving Priorix had substantially lower pain scores compared to MMR-II (mean CHEOPS = 1.9 versus 6.1, $p < 0.001$; mean VAS = 2.3 versus 5.2, $p < 0.001$, respectively). MMR-II was much more likely to produce a scream in children ($n = 78$ versus $n = 12$, $p < 0.001$), and all children had settled to no cry by 3 minutes after injection.

- Simultaneous versus sequential vaccines

- McGowan, Cottrell, Roberts, et al (2013) randomized 72 infants between 2 and 6 months old to receive either simultaneous or sequential vaccines. Half of the participants ($n = 36$) received DTaP-IPV-Hib and PCV, and half received DTaP-IPV-Hib and meningococcal-C (MEN-C). Pain was measured using nurse-scored MBPS and parent-scored VAS. There was no difference in VAS between the sequential and simultaneous groups. There is some evidence ($p = 0.7$) that infants in the sequential group experienced more discomfort for a