

# 2010 Recommended Immunization Schedule Ages 7 – 18 Years

United States



Vaccine ▼	Age ►	7 – 10 Years	11 – 12 Years	13 – 18 Years
Tetanus, Diphtheria, Pertussis <sup>1</sup>			Tdap	Tdap
Human Papillomavirus <sup>2</sup>	see footnote 2		HPV (3 doses)	HPV Series
Meningococcal <sup>3</sup>		MCV	MCV	MCV
Influenza <sup>4</sup>		Influenza (Yearly)		
Pneumococcal <sup>5</sup>		PPSV		
Hepatitis A <sup>6</sup>		HepA Series		
Hepatitis B <sup>7</sup>		HepB Series		
Inactivated Poliovirus <sup>8</sup>		IPV Series		
Measles, Mumps, Rubella <sup>9</sup>		MMR Series		
Varicella <sup>10</sup>		Varicella Series		

Range of recommended ages

Catch-up immunization

Certain high-risk groups

This schedule includes recommendations in effect as of December 15, 2009. Any dose not administered at the recommended age should be administered at any subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines. Considerations should include provider assessment, patient preference, and the potential for adverse events.

Find more information at [www.cdc.gov/vaccines/recs/schedules](http://www.cdc.gov/vaccines/recs/schedules).

Providers should consult the relevant **Advisory Committee on Immunization Practices statement for detailed recommendations:** [www.cdc.gov/vaccines/pubs/ACIP-list.htm](http://www.cdc.gov/vaccines/pubs/ACIP-list.htm). Clinically significant adverse events that follow immunization should be reported to the **Vaccine Adverse Event Reporting System (VAERS)** at [www.vaers.hhs.gov](http://www.vaers.hhs.gov) or by telephone at, 1-800-822-7967.

This schedule is approved by The Advisory Committee on Immunization Practices [www.cdc.gov/vaccines/recs/acip](http://www.cdc.gov/vaccines/recs/acip), The American Academy of Pediatrics [www.aap.org](http://www.aap.org), The American Academy of Family Physicians [www.aafp.org](http://www.aafp.org)

## FOOTNOTES

### 1. Tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap) (Minimum age: 10 years for BOOSTRIX® and 11 years for ADACEL®)

- Administer at age 11 or 12 years for those who have completed the recommended childhood DTP/DTaP vaccination series and have not received a tetanus and diphtheria toxoid (Td) booster dose.
- Persons aged 13 through 18 years who have not received Tdap should receive a dose.
- A 5-year interval from the last Td dose is encouraged when Tdap is used as a booster dose; however, a shorter interval may be used if pertussis immunity is needed.

### 2. Human papillomavirus vaccine (HPV) (Minimum age: 9 years)

- Two HPV vaccines are licensed: a quadrivalent vaccine (HPV4) for the prevention of cervical, vaginal, and vulvar cancers (in females) and genital warts (in females and males), and a bivalent vaccine (HPV2) for the prevention of cervical cancers in females.
- HPV vaccines are most effective for both males and females when given before exposure to HPV through sexual contact.
- HPV4 or HPV2 is recommended for the prevention of cervical precancers and cancers in females.
- HPV4 is recommended for the prevention of cervical, vaginal, and vulvar precancers and cancers, and genital warts in females.
- Administer the first dose to females at age 11 or 12 years.
- Administer the second dose 1 to 2 months after the first dose and the third dose 6 months after the first dose (at least 24 weeks after the first dose).
- Administer the series to females at age 13 through 18 years if not previously vaccinated.
- HPV4 may be administered in a 3-dose series to males aged 9 through 18 years to reduce their likelihood of acquiring genital warts.

### 3. Meningococcal conjugate vaccine (MCV)

- Administer at age 11 or 12 years, or at age 13 through 18 years if not previously vaccinated.
- Administer to previously unvaccinated college freshmen living in a dormitory.
- Administer MCV4 to children aged 2 through 10 years with persistent complement component deficiency, anatomic or functional asplenia, and certain other conditions placing them at high risk.
- Administer to children previously vaccinated with MCV4 or MPSV4 who remain at increased risk after 3 years (if first dose administered at age 2 through 6 years) or after 5 years (if first dose administered at age 7 years or older). Persons whose only risk factor is living in on-campus housing are not recommended to receive an additional dose.

### 4. Influenza vaccine (seasonal)

- Administer annually to children aged 6 months through 18 years.
- For healthy nonpregnant persons aged 7 through 18 years (i.e., those who do not have underlying medical conditions that predispose them to influenza complications), either LAIV or TIV may be used.
- Administer 2 doses (separated by at least 4 weeks) to children aged younger than 9 years who are receiving influenza vaccine for the first time or who were vaccinated for the first time during the previous influenza season but only received 1 dose.
- For recommendations for use of influenza A (H1N1) 2009 monovalent vaccine, see *MMWR* 2009;58(No. RR-10).

### 5. Pneumococcal polysaccharide vaccine (PPSV)

- Administer to children with certain underlying medical conditions, including a cochlear implant. A single revaccination should be administered after 5 years to children with functional or anatomic asplenia or an immunocompromising condition.

### 6. Hepatitis A vaccine (HepA)

- Administer 2 doses at least 6 months apart.
- HepA is recommended for children older than 23 months who live in areas where vaccination programs target older children, who are at increased risk for infection, or for whom immunity against hepatitis A is desired.

### 7. Hepatitis B vaccine (HepB)

- Administer the 3-dose series to those not previously vaccinated.
- A 2-dose series (separated by at least 4 months) of adult formulation Recombivax HB® is licensed for children aged 11 through 15 years.

### 8. Inactivated poliovirus vaccine (IPV)

- The final dose in the series should be administered on or after the fourth birthday and at least 6 months following the previous dose.
- If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age.

### 9. Measles, mumps, and rubella vaccine (MMR)

- If not previously vaccinated, administer 2 doses or the second dose for those who have received only 1 dose, with at least 28 days between doses.

### 10. Varicella vaccine

- For persons aged 7 through 18 years without evidence of immunity, administer 2 doses if not previously vaccinated or the second dose if only 1 dose has been administered.
- For persons aged 7 through 12 years, the minimum interval between doses is 3 months. However, if the second dose was administered at least 28 days after the first dose, it can be accepted as valid.
- For persons aged 13 years and older, the minimum interval between doses is 28 days.

# Catch-up Immunization Schedule 7 – 18 Years

United States, 2010

This table provides catch-up schedules and minimum intervals between doses for children 7–18 years old, whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses.

Vaccine ▼	Minimum Age for Dose 1	Minimum Interval Between Doses		
		Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4
Tetanus, Diphtheria or Diphtheria, Tetanus, Pertussis <sup>1</sup>	7 years <sup>1</sup>	4 weeks	4 weeks if first dose given at younger than 12 months 6 months if first dose given at age 12 months or older	6 months if first dose given at younger than age 12 months
Human Papillomavirus <sup>2</sup>	9 years	Routine dosing intervals are recommended <sup>2</sup>		
Hepatitis A <sup>3</sup>	12 months	6 months		
Hepatitis B <sup>4</sup>	Birth	4 weeks	8 weeks and at least 16 weeks after first dose	
Inactivated Poliovirus <sup>5</sup>	6 weeks	4 weeks	4 weeks	4 weeks <sup>5</sup>
Measles, Mumps, Rubella <sup>6</sup>	12 months	4 weeks		
Varicella <sup>7</sup>	12 months	3 months if the person is younger than 13 years 4 weeks if the person is aged 13 years or older		

## FOOTNOTES

### 1. Tetanus and diphtheria toxoids vaccine (Td) and tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap)

- Doses of DTaP are counted as part of the Td/Tdap series.
- Tdap should be substituted for a single dose of Td in the catch-up series or as a booster for children aged 10 through 18 years; use Td for other doses.

### 2. Human papillomavirus vaccine (HPV)

- Administer the series to females at age 13 through 18 years if not previously vaccinated.
- Use recommended routine dosing intervals for series catch-up (i.e., the second and third doses should be administered at 1 to 2 and 6 months after the first dose). The minimum interval between the first and second doses is 4 weeks. The minimum interval between the second and third doses is 12 weeks, and the third dose should be given at least 24 weeks after the first dose.

### 3. Hepatitis A vaccine (HepA)

- HepA is recommended for children older than 23 months who live in areas where vaccination programs target older children, who are at increased risk for infection, or for whom immunity against hepatitis A is desired.

### 4. Hepatitis B vaccine (HepB)

- Administer the 3-dose series to those not previously vaccinated.
- A 2-dose series (separated by at least 4 months) of adult formulation Recombivax HB® is licensed for children aged 11 through 15 years.

### 5. Inactivated poliovirus vaccine (IPV)

- The final dose in the series should be administered on or after the fourth birthday and at least 6 months following the previous dose.
- A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least 6 months following the previous dose.
- In the first 6 months of life, minimum age and minimum intervals are only recommended if the person is at risk for imminent exposure to circulating poliovirus (i.e., travel to a polio-endemic region or during an outbreak).

### 6. Measles, mumps, and rubella vaccine (MMR)

- If not previously vaccinated, administer 2 doses with at least 28 days between doses.

### 7. Varicella vaccine

- For persons aged 12 months through 12 years, the minimum interval between doses is 3 months. However, if the second dose was administered at least 28 days after the first dose, it can be accepted as valid.
- For persons aged 13 years and older, the minimum interval between doses is 28 days.

### Information about reporting reactions after immunization is available:

- Online at [www.vaers.hhs.gov](http://www.vaers.hhs.gov)
- By telephone at the 24-hour national toll-free information line at **1-800-822-7967**

Suspected cases of vaccine-preventable diseases should be reported to the state Department of Health.

Find more information, including precautions and contraindications for immunization, from the National Center for Immunization and Respiratory Diseases at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines) or by telephone at **1-800-CDC-INFO** (1-800-232-4636).

Partially funded by the Federal Vaccines For Children program. If you have a disability and need this document in another format, please call 1-800-525-0127 (TDD/TTY 1-800-833-6388).

