

2009 Recommended Immunization Schedule Ages 7 – 18 Years

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

Range of recommended ages

Catch-up immunization

Certain high-risk groups

This schedule is approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP).

This schedule indicates the recommended ages for routine administration of currently licensed childhood vaccines, as of December 1, 2008, for children aged 7 through 18 years. Additional information is available at www.cdc.gov/vaccines/recs/schedules. Any dose not administered at the recommended age should be administered at any subsequent visit, when indicated and feasible. Additional vaccines may be licensed and recommended during the year. Licensed combination vaccines may be used whenever any components of the combination are indicated and other components of the vaccine are not contraindicated and if approved by the Food and Drug Administration for that dose of the series.

Providers should consult the relevant Advisory Committee on Immunization Practices statement for detailed recommendations, including for **high risk conditions**: 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). Guidance about how to obtain and complete a VAERS form is available at www.vaers.hhs.gov or by telephone at **1-800-822-7967**.

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)

- Administer the first dose to females at age 11 or 12 years.
- Administer the second dose 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.

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.
- MCV is recommended for children aged 2 through 10 years with terminal complement component deficiency, anatomic or functional asplenia, and certain other groups at high risk.
- Persons who received MPSV five or more years previously and remain at increased risk for meningococcal disease should be revaccinated with MCV.

4. Influenza vaccine

- Administer annually to children aged 6 months through 18 years.
- For healthy nonpregnant persons (i.e., those who do not have underlying medical conditions that predispose them to influenza complications) aged 2 through 49 years, 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.

5. Pneumococcal polysaccharide vaccine (PPSV)

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

6. Hepatitis A vaccine (HepA)

- Administer 2 doses at least 6 months apart.
- HepA is recommended for children older than 1 year who live in areas where vaccination programs target older children or who are at increased risk of infection.

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)

- For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if the third dose was administered at age 4 years or older.
- 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 they have received only 1 dose.
- 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, 2009

This table provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age.

| 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 ¹ | 7 years ¹ | 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 ² | 9 years | 4 weeks | 12 weeks (and 24 weeks after first dose) | |
| Hepatitis A ³ | 12 months | 6 months | | |
| Hepatitis B ⁴ | Birth | 4 weeks | 8 weeks (and 16 weeks after first dose) | |
| Inactivated Poliovirus ⁵ | 6 weeks | 4 weeks | 4 weeks | 4 weeks ⁵ |
| Measles, Mumps, Rubella ⁶ | 12 months | 4 weeks | | |
| Varicella ⁷ | 12 months | 4 weeks if the person is aged 13 years or older 3 months if the person is younger than 13 years | | |

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 2 and 6 months after the first dose). However, 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 1 year who live in areas where vaccination programs target older children or who are at increased risk of infection.

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)

- For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if the third dose was administered at age 4 years or older.
- 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.

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 <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.

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

