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1997 Alaska Immunization Recommendations - Part I

Shown below is the *Recommended Childhood Immunization Schedule--Alaska, 1997*. The official schedule for the United States was approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP). Providers should consult the official publication (*MMWR*, January 17, 1997/ Vol. 46/ No. 2) for detailed recommendations. The **footnotes** shown below (circled numbers, e.g., ❶) indicate the Section of Epidemiology's recommendations for Alaska immunization providers. The two major highlights for Alaska (below) are discussed at length in the accompanying *Epidemiology Bulletin* No. 11, 1997 **Alaska Immunization Recommendations - Part II**.

- **DTaP** (diphtheria/tetanus/acellular pertussis) and **Hib** will soon be supplied separately by the Alaska Immunization Program. This change will allow providers to use DTaP, which causes fewer adverse reactions than the whole cell pertussis component found in *Tetramune*® (DTP/Hib combination). DTaP is not yet available combined with Hib vaccine.
- We continue to strongly recommend use of **OPV** (Oral Polio Vaccine) for the entire polio vaccination series.

Recommended Childhood Immunization Schedule -- Alaska, 1997

Vaccine	Age										
	Birth	1 mo	2 mo	4 mo	6 mo	12 mos	15 mos	18 mos	4-6 yrs	11-12 yrs	14-16 yrs
Hepatitis B	Hep B-1 ❶								DTaP or DTP		
		Hep B-2 ❶			Hep B-3 ❶					Hep B ❶	
Diphtheria/Tetanus/Pertussis		DTaP or DTP ❶	DTaP or DTP	DTaP or DTP	DTaP or DTP	❶	DTaP or DTP		DTaP or DTP	Td ❶	
Haemophilus influenzae type b		Hib	Hib	Hib		Hib					
Poliovirus		Polio	Polio		❶	Polio			Polio		
Measles/Mumps/Rubella						MMR			MMR ❶	MMR	
Varicella						Var ❶				Var	
Hepatitis A	Give as early as possible at any time from 2-14 years of age (2 doses, at least 6 months apart)										

■ Range of Acceptable Ages for Vaccination ■ "Catch-Up" Vaccination

Alaska Section of Epidemiology Notes:

- ❶ **Hepatitis B** - The first 3 doses of hepatitis B vaccine should be given at birth, 1 month, and 6 months of age.
- ❶ **Hepatitis B** - For adolescents without a previous history of receipt of hepatitis B vaccine, 3 doses of State of Alaska supplied vaccine should be given at age 12. ** (The second dose should be administered at least 1 month after the first dose, and the third dose should be administered at least 4 months after the first dose and at least 2 months after the second dose.)
- ❶ **DTaP** - When existing supplies of *Tetramune*® are depleted, providers should begin using DTaP for ANY DOSE in this series, including for completion of the series in children who have received one or more doses of whole-cell DTP.
- ❶ **DTaP** - The fourth dose of DTaP may be administered as early as 12 months of age provided at least 6 months have elapsed since the third dose and if the child is considered unlikely to return at 15-18 months of age.
- ❶ **Td** - Td (adult) is recommended at age 11-12 years ** if at least 5 years have elapsed since the last dose of DTP, DTaP, or diphtheria and tetanus toxoids. Subsequent routine Td boosters are recommended every 10 years.
- ❶ **Polio** - Both Inactivated Polio Vaccine (IPV) and Oral Polio Vaccine (OPV) are licensed in the United States. The Alaska Section of Epidemiology recommends that OPV be used for the entire vaccination series, in which case the 3rd dose of vaccine is recommended at 6 months of age. If the sequential schedule of 2 doses of IPV followed by 2 doses of OPV is used, the 3rd dose should be given at 12-18 months of age. IPV is the only poliovirus vaccine recommended for immunocompromised persons and their household contacts. A *minimum interval* of four weeks is required between the first three doses of IPV, OPV, or any combination of the two vaccines.
- ❶ **MMR** - The Section of Epidemiology recommends that the 2nd dose of measles/mumps/rubella vaccine be given at 4-6 years of age, though it may be administered during any visit provided at least 1 month has elapsed since receipt of the first dose and that both doses are administered on or after the first birthday. For children who have not received a 2nd dose of MMR, a "catch-up" dose may be administered at 11-12 years of age**.
- ❶ **Varicella** - At this time, varicella vaccine is not available through the Section of Epidemiology. If vaccine is available to a provider, susceptible children may receive varicella vaccine during any visit after the 1st birthday, and unvaccinated persons who lack a reliable history of chickenpox should be vaccinated at age 11-12 years.** Susceptible persons aged ≥13 years should receive two doses at least 1 month apart.

** Watch for an upcoming *Epidemiology Bulletin* for details on immunizations which may be delivered at a newly recommended Adolescent Health Visit.