CATCH-UP SCHEDULE FOR ROUTINELY RECOMMENDED VACCINES FOR PERSONS AGED 4 MONTHS–8 YEARS

**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** | **Dose 4 to Dose 5**
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Hepatitis B | Birth | 4 wks (and at least 16 wks after 1st dose) | Hepatitis B | 8 wks | | | |
Rotavirus | 6 wks | 4 wks | | | | |
Diphtheria, Tetanus, Pertussis | 6 wks | 4 wks | | | | |
Haemophilus influenzae type b (PevaxHIB®) | 6 wks | 4 wks (as final dose) | Haemophilus influenzae type b (PevaxHIB®) | 4 wks | 8 wks (as final dose) | 8 wks | 8 wks | 8 wks

Pneumococcal conjugate vaccine (PCV) | 6 wks | 8 wks | No further doses needed | No further doses needed | No further doses needed | 8 wks (as final dose) | 8 wks | 8 wks

Inactivated Poliovirus | 6 wks | 4 wks | | | | |
Hepatitis A | 12 mos | 6 mos | | | | |
Measles, Mumps, Rubella | 12 mos | 4 wks | | | | |
Varicella | 12 mos | 3 mos | | | | |
Hepatitis A | 12 mos | 6 mos | | | | |

**TETANUS, DIPHTHERIA, AND ACETYL-PERTUSSIS TOXOID (Tdap)**

**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** | **Dose 4 to Dose 5**
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Tetanus, Diphtheria, Pertussis | Td, 7 yrs | | | | | |
Tdap, 10 yrs | 4 wks | 4 wks | 6 mos | | | |

**INACTIVE VACCINES**

**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** | **Dose 4 to Dose 5**
--- | --- | --- | --- | --- | --- | ---
Hepatitis A | 12 mos | 6 mos | | | | |
Measles, Mumps, Rubella | 12 mos | 4 wks | | | | |
Varicella | 12 mos | 6 mos | | | | |

**HEPATITIS B VACCINE (Hep B)**

• Administer the 3-dose series to those not previously vaccinated.

**Rotavirus vaccine (RV)**

• Do not start series if child aged ≥2 yr.

• Administer the final dose in series by age 8 mos, 0 days.

**Diphtheria/tetanus toxoids & acellular pertussis vaccine (DTaP)**

• 5th dose not necessary if 4th dose administered at age ≥4 yrs.

• Administer 1 dose of PevaxHIB® with the 5th dose.

**Haemophilus influenzae type b conjugate vaccine (Hib)**

• Hib vaccine is not routinely recommended for children aged ≥2 yrs. No efficacy data are available on which to base a recommendation for use of Hib vaccine for older children and adults. However, studies suggest good immunogenicity in persons who have sickle cell disease, leukemia, or HIV infection, or who have had a splenectomy; administering 1 dose of Hib vaccine to these persons who have not previously received Hib vaccine is not contraindicated.

• The 3rd (and final) dose of PevaxHIB® (the Hib vaccine type used in Alaska) should be administered at age 12–15 mos and at least 8 wks after the 2nd dose.

**Pneumococcal conjugate vaccine (PCV)**

• Administer 1 dose of PCV13 to all healthy children aged 24–59 mos having any incomplete PCV7 schedule.

• Administer 1 supplemental dose of PCV13 to all children aged 14–59 mos having any complete PCV7 schedule.

• For children ≥6 mos with underlying medical conditions, administer 1 dose of PCV11 if ≥2 PCV7 doses were received previously, or administer 2 doses of PCV13 at least 8 wks apart if ≥3 PCV7 doses were received previously.

• Administer pneumococcal polysaccharide vaccine (PPSV) to children aged ≥2 yrs with certain underlying medical conditions, including a cochlear implant.

• Inactivated poliovirus vaccine (IPV)**

• Final dose in series should be at age ≥4 yrs and ≤26 mos from previous dose.

• 4th dose not necessary if 3rd dose is administered at age ≥4 yrs and ≥26 mos from previous dose.

• If ≤6 mos of age, minimum age and minimum intervals recommended only if person is at risk for imminent exposure to circulating virus.

• Measles, mumps, and rubella vaccine (MMR)**

• The 2nd dose of MMR is recommended routinely at age 4–6 yrs but may be administered earlier if at least 28 days have elapsed since dose 1.

• If not previously vaccinated, administer 2 doses with ≥28 days between doses.

• Varicella vaccine**

• The 2nd dose of varicella vaccine is recommended routinely at age 4–6 yrs but may be administered earlier if at least 3 mos have elapsed since dose 1.

• For persons aged 12 mos–12 yrs, the minimum interval between doses is 3 mos. If the immunization history indicates dose 1 and dose 2 were separated by ≥28 days, but less than the currently recommended interval of 3 mos, dose 2 can be accepted as valid.

• For persons aged ≥13 yrs, the minimum interval between doses is 28 days.

• Hepatitis A vaccine (Hep A)**

• Two doses recommended for all Alaskans aged ≥12 mos.

• Tetravalent and diphtheria toxoids vaccine (Td) and tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap)**

• Doses of Tdap are counted as part of 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 10–18 yrs (for Boostrix®) or 11–18 yrs (for Adacel®), use Td for other doses.

• Human Papillomavirus Vaccine (HPV)**

• State-supplied HPV vaccine is available only for children who meet VFC eligibility requirements.*

• Administer dose 1 to females at age 11–12 yrs.

• Administer second dose 1–2 mos after 1st dose and ≥3 mos after 1st dose (at least ≥24 weeks after first dose).

• HPV4 may be administered in 3-dose series to males aged 9–18 yrs to reduce their likelihood of acquiring genital warts.

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