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Bulletin No. 5 January 23, 2009

Recommended Immunization Schedule for Children Aged 7–18 Years — Alaska, 2009

Vaccine ▼	Age ►	7–10 years	11–12 years	13–18 years
Tetanus, Diphtheria, Pertussis (Tdap)		See Tdap footnote	Tdap	Tdap
Human Papillomavirus (HPV)		See HPV footnote	HPV (3 doses)	HPV Series
Meningococcal		MCV	MCV	MCV
Influenza		Influenza (yearly)		
Pneumococcal		PPSV		
Hepatitis A		Hep A Series		
Hepatitis B		Hep B Series		
Inactivated Poliovirus		IPV Series		
Measles, Mumps, Rubella		MMR Series		
Varicella		Varicella Series		

 Catch-up immunization

 Certain high-risk groups

Tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap) (Minimum age: 10 yrs for Boostrix®, 11 yrs for Adacel®)

- Administer at age 11–12 yrs for those who have completed the recommended childhood DTP/DTaP vaccination series and have not received a Td booster dose.
- Adolescents aged 13–18 yrs who have not received Tdap should receive a dose.
- A 5-yr 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.

Human papillomavirus vaccine (HPV) (Minimum age: 9 yrs)

- Administer dose 1 of HPV vaccine series to females at age 11–12 yrs. (Note: State-supplied HPV vaccine is available only for children who meet Vaccines for Children [VFC] eligibility requirements.*)
- Administer second dose 2 mos after first dose and third dose 6 mos after first dose (at least 24 weeks after the first dose).
- Administer HPV vaccine series to females at age 13–18 yrs if not previously vaccinated.

Meningococcal conjugate vaccine (MCV)

- Administer 1 dose of MCV at age 11–12 yrs, or at age 13–18 yrs if not previously vaccinated. (Note: State-supplied MCV is available only for children who meet VFC eligibility requirements.*)
- Administer MCV to previously unvaccinated college freshmen living in dormitories.
- MCV is recommended for children aged 2–10 yrs with terminal complement component deficiency, anatomic or functional asplenia, and certain other groups at high risk (<http://www.cdc.gov/mmwr/PDF/rr/rr5407.pdf> [Table 6]).
- Persons who received MPSV ≥ 5 yrs previously and remain at increased risk for meningococcal disease should be revaccinated with MCV. (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5648a4.htm?s_cid=mm5648a4_e)

Influenza vaccine

- Administer annually to children aged 6 mos–18 yrs.
- For healthy nonpregnant persons (i.e., those who do not have underlying medical conditions that predispose them to influenza complications) aged 2–49 yrs, either Live Attenuated Influenza Vaccine (LAIV) or Trivalent Inactivated Influenza Vaccine (TIV) may be used.

- Administer 2 doses (separated by ≥ 4 weeks) to children aged < 9 yrs who are receiving influenza vaccine for the first time or who were vaccinated for the first time during the previous influenza season but received only 1 dose.

Pneumococcal polysaccharide vaccine (PPSV)

- Administer to children with certain underlying medical conditions, including a cochlear implant. (<http://www.cdc.gov/mmwr/PDF/rr/rr4909.pdf> [Table 12]). A single revaccination should be administered after 5 yrs to children with functional or anatomic asplenia or other immunocompromising condition.

Hepatitis A vaccine (Hep A)

- Administer to all children aged ≥ 12 mos.
- Administer the 2 doses in the series at least 6 months apart.

Hepatitis B vaccine (Hep B)

- Administer the 3-dose series (at “0”, 2 and 6 months apart) to persons who were not previously vaccinated.

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 yrs.
- If both OPV and IPV were administered as part of a series, a total of 4 doses should be given, regardless of the child’s current age.

Measles, mumps and rubella vaccine (MMR)

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

Varicella vaccine

- For persons aged 7–18 yrs without evidence of immunity, administer 2 doses of varicella vaccine if not previously vaccinated or the second dose if they have received only 1 dose. (<http://www.cdc.gov/mmwr/pdf/rr/rr5604.pdf>)
- For children 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.
- Administer 2 doses of varicella vaccine at least 28 days apart to persons aged ≥ 13 yrs.