



IAP Recommended immunization schedule for children aged 0-6 years (with range), 2012

Age ▶	Birth	6 wk	10 wk	14 wk	18 wk	6 mo	9 mo	12 mo	15 mo	18 mo	2-3 Yr	4-6 Yr
Vaccine ▼												
BCG	BCG											
Hep B	Hep B1	Hep B2			Hep B3							
Polio*	OPV0	IPV1	IPV2	IPV3		OPV1	OPV2	IPV B1				OPV3
DTP		DTP 1	DTP 2	DTP 3				DTP B1				DTP B2
Hib		Hib 1	Hib 2	Hib 3			Hib-booster					
Pneumococcal		PCV 1	PCV 2	PCV 3			PCV -booster			PPSV		
Rotavirus**		RV 1	RV 2	RV* 3								
Measles						Measles						
MMR							MMR 1				MMR 2	
Varicella							Varicella 1				Varicella 2	
Hep A							Hep A 1			Hep A 2		
Typhoid											Typhoid	
Influenza						Influenza (yearly)						
Meningococcal											Meningococcal	
Cholera								Cholera 1 & 2				
JE							JE					

Range of recommended ages for all children

Range of recommended ages for certain high-risk groups

(This schedule includes recommendations in effect as of April 2012. Any dose not administered at the recommended age should be administered at a subsequent visit, when indicated and feasible. The use of a combination vaccine generally is preferred over separate injections of its equivalent component vaccines).

1-BCG Vaccine:

- Should be given at birth or at first contact
- Catch up may be given up to 5 years

2- Hepatitis B (HepB) vaccine

- Minimum age: birth
- Administer monovalent HepB vaccine to all newborns before hospital discharge.
- Monovalent HepB vaccine should be used for doses administered before age 6 weeks.
- Administration of a total of 4 doses of HepB vaccine is permissible when a combination vaccine containing HepB is administered after the birth dose.
- Infants who did not receive a birth dose should receive 3 doses of a HepB containing vaccine starting as soon as feasible.
- The ideal minimum interval between dose 1 and dose 2 is 4 weeks, and between dose 2 and 3 is 8 weeks.
- Ideally, the final (third or fourth) dose in the HepB vaccine series should be administered no earlier than age 24 weeks and at least 16 weeks after the first dose.
- Hep B vaccine may also be given in any of the following schedules: Birth, 1, & 6 mo, Birth, 6 and 14 weeks; 6, 10 and 14 weeks; Birth, 6 weeks, 10 weeks, 14 weeks, etc.

3-Poliovirus vaccines*.

- OPV in place of IPV if IPV is unaffordable/unavailable, minimum 3 doses
- Additional doses of OPV on all SIAs
- IPV: Minimum age: 6 weeks
- IPV: 2 instead of 3 doses can be also used if primary series started at 8 weeks and the interval between the doses is kept 8 weeks
- IPV catch-up schedule: 2 doses at 2 months apart followed by a booster after 6 months

4- Diphtheria and tetanus toxoids and pertussis (DTP) vaccine.

- Minimum age: 6 weeks
- The first booster (4th dose) may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.

- DTWP/DTaP/Tdap/Td: Catch up below 7 years: DTWP/DTaP at 0, 1 and 6 months;
- Catch up above 7 years: Tdap, Td, Td at 0, 1 and 6 months.

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

- Minimum age: 6 weeks
- Catch up in 6-12 months; 2 doses 1 month apart and 1 booster; 12-15 months: 1 primary and 1 booster; above 15 months single dose.

6. Pneumococcal vaccines

- Minimum age: 6 weeks for pneumococcal conjugate vaccine [PCV]; 2 years for pneumococcal polysaccharide vaccine [PPSV]
- Administer 1 dose of PCV to all healthy children aged 24 through 59 months who are not completely vaccinated for their age.
- For children who have received an age-appropriate series of 7-valent PCV (PCV7), a single supplemental dose of 13-valent PCV (PCV13) is recommended for:
 - All children aged 14 through 59 months
 - Children aged 60 through 71 months with underlying medical conditions.
- Administer PPSV at least 8 weeks after last dose of PCV to children aged 2 years or older with certain underlying medical conditions (certain high-risk groups)
- PCV: Catch up in 6-12 months: 2 doses 1 month apart and 1 booster; 12-23 months: 2 doses 2 months apart; 24 mo & above: single dose
- PPSV: Revaccination only once after 3-5 years only in certain high risk patients.

7. Rotavirus (RV) vaccines**

- Minimum age: 6 weeks for both RV-1 [Rotarix] and RV-5 [Rota Teq]
- Only two doses of RV-1 are recommended at present
- The maximum age for the first dose in the series is 14 weeks, 6 days; and 8 months, 0 days for the final dose in the series.
- Vaccination should not be initiated for infants aged 15 weeks, 0 days or older.

8. Measles.

- Minimum age: At completed months/270 completed days;
- Catch up vaccination beyond 12 months should be MMR
- Measles vaccine can be administered to infants aged 6 through 11 months during outbreaks. These children should be revaccinated with 2 doses of measles containing vaccines, the first at ages 12 through 15 months and at least 4 weeks after the previous dose, and the second at ages 4 through 6 years

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

- Minimum age: 12 months
- The second dose may be administered before age 4 years, provided at least 4 weeks have elapsed since the first dose.

10. Varicella vaccine.

- Minimum age: 12 months
- The risk of breakthrough varicella is lower if given 15 months onwards.
- The second dose may be administered before age 4 years, provided at least 3 months have elapsed since the first dose.
- For children aged 12 months through 12 years, the recommended minimum interval between doses is 3 months. However, if the second dose was administered at least 4 weeks after the first dose, it can be accepted as valid.

11. Hepatitis A (HepA) vaccine.

- Minimum age: 12 months
- Two doses of both killed and live HepA vaccines.
- Administer the second (final) dose 6 to 18 months after the first.

12. Typhoid vaccine.

- Only Vi-PS (polysaccharide) vaccine is recommended
- Minimum age: 2 years; Revaccination every 3 years
- Vi-PS conjugate vaccine: data not sufficient to recommend for routine use of currently available vaccine

13. Influenza vaccine.

- Minimum age: 6 months for trivalent inactivated influenza vaccine
- First time vaccination: 6 months to below 9 years: two doses 1 month apart; 9 years and above single dose; Annual revaccination with single dose.
- For children aged 6 months to below 9 years: For the 2012 season, administer 2 doses (separated by at least 4 weeks) to those who did not receive at least 1 dose of the 2010-11 vaccine. Those who received at least 1 dose of the 2010-11 vaccine require 1 dose for the 2011-12 season
- Best time to vaccinate: as soon as the new vaccine is released and available in the market & just before the onset of rainy season;

14. Meningococcal vaccine.

- Only meningococcal polysaccharide vaccine (MPSV) is available
- Minimum age: 2 years
- Revaccination only once after 3 years in those at continued high risk

15. Cholera Vaccine.

- Minimum age: one year (killed whole cell vibrio cholera (Shanchol))
- Two doses 2 weeks apart for >1 year old

16. Japanese encephalitis (JE) vaccine.

- Recommended in endemic areas only
 - Live attenuated, cell culture derived SA-14-14-2 vaccine is preferred
 - Minimum age: 8 months; can be co-administered with measles vaccine at 9 months; single dose
 - Catch up vaccination: all susceptible children up to 15 yrs should be administered during disease outbreak/ahead of anticipated outbreak in campaigns
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