Deviations to Schedule late entrants etc..

Kevin Connolly
Waterford, August, 2012

In the absence of reliable information /documentation to the contrary, children should be assumed to be un-immunised and started on a catch-up programme.

Accelerated Primary Immunisation

Accelerated primary immunisation is recommended for children who were not immunised in the first year of life. The schedules below reflect the childhood vaccines currently recommended in Ireland

Children aged 4 months to <12 months of age

- 1 dose of BCG
- 3 doses of 6 in 1 (DTaP/IPV/Hib/Hep B) at 2 month intervals
- 2 doses of Men C at 2 month intervals
- 2 doses of PCV at 2 month intervals

Continue with routine childhood immunisations from 12 months of age.

Children aged 12 months to <4 yrs of age

- 1 dose of BCG
- 3 doses of 6 in 1 (DTaP/IPV/Hib/Hep B) at 2 month intervals
- 1 dose of Men C
- 1 dose of PCV (omit if >2 years of age)
- 1 dose of MMR

Continue with routine school immunisations from 4 years of age

- Booster DTaP/IPV at least 3 years after the primary course
- Second MMR at least one month after the first dose (see below)

	4 months to <12 months	12 months to < 4 years	4 – <10 years	10 years and over
BCG	1 dose	1 dose	1 dose	1 dose (up to 15 years of age if in low risk group or 35 years of age if in specified high risk group)
6 in 1 (DTaP/IPV/Hib ¹ /Hep B)	3 doses at 2 month intervals	3 doses at 2 month intervals	3 doses at 2 month intervals	
Men C	2 doses at 2 month intervals	1 dose	1 dose	1 dose (up to 23 years of age)
PCV ²	2 doses at 2 month intervals	1 dose (omit if >2 years of age)	3	
MMR ³		1 dose	2 doses at 1 month intervals	2 doses at 1 month intervals
Tdap/IPV				3 doses at 1 month intervals
NOTE	Continue with routine childhood immunisation schedule from 12 months.	Continue with routine school immunisations [4 in 1 (DTaP/IPV) at least 6 months and preferably 3 years after primary course, MMR at least 1 month after previous dose]	Continue with routine school immunisations [4 in 1 (DTaP/IPV) at least 6 months and preferably 3 years after primary course]	Boosters of Tdap/IPV 5 years after primary course and Tdap 10 years later

¹ One dose of single Hib vaccine may be given to children over 12 months of age and up to 10 years of age if this is the only vaccine they require

² PCV vaccine should be given to at risk children aged 24-59 months. For schedule for children at risk see detailed recommendations in Immunisation Guidelines

⁸ The second dose of MMR is recommended routinely at 4-5 years but may be administered earlier. Children vaccinated before their first birthday in the case of an outbreak should have a repeat MMR vaccination at 12 months of age, at least one month after the first vaccine with a further dose at 4-5 years of age. If a child aged <18 months receives a second MMR vaccine within 3 months of the first MMR a third MMR should be given at 4-5yrs of age.

	4 months to <12 months	12 months to < 4 years	4 – <10 years	10 years and over
Tdap/IPV				3 doses at 1 month intervals
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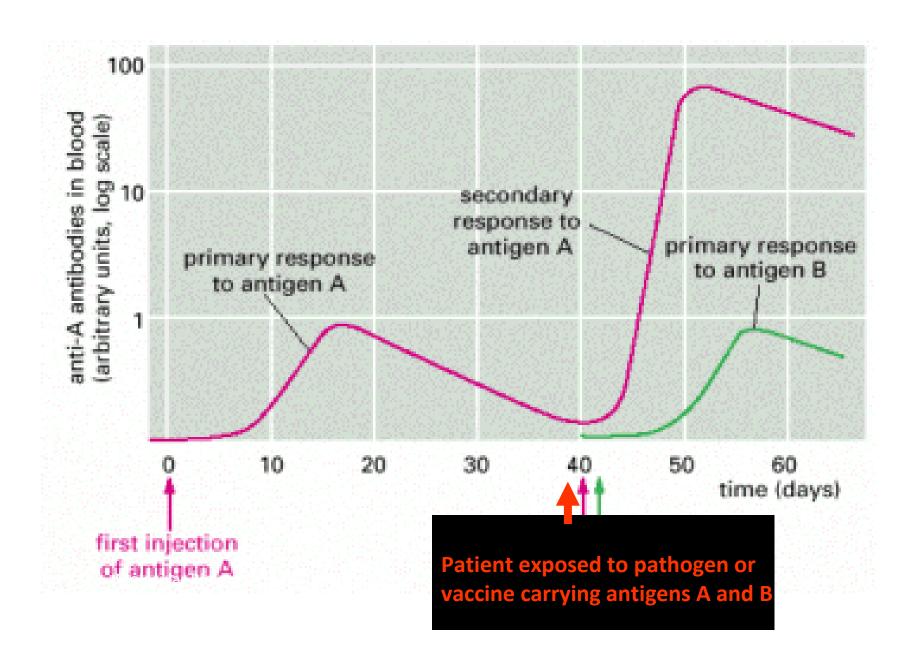
The second dose of MMR is recommended routinely at 4-5 years but may be administered earlier. Children vaccinated before their first birthday in the case of an outbreak should have a repeat MMR vaccination at 12 months of age, at least one month after the first vaccine with a further dose at 4-5 years of age. If a child aged <18 months receives a second MMR vaccine within 3 months of the first MMR a third MMR should be given at 4-5yrs of age.</p>

Contra-indications to immunisation

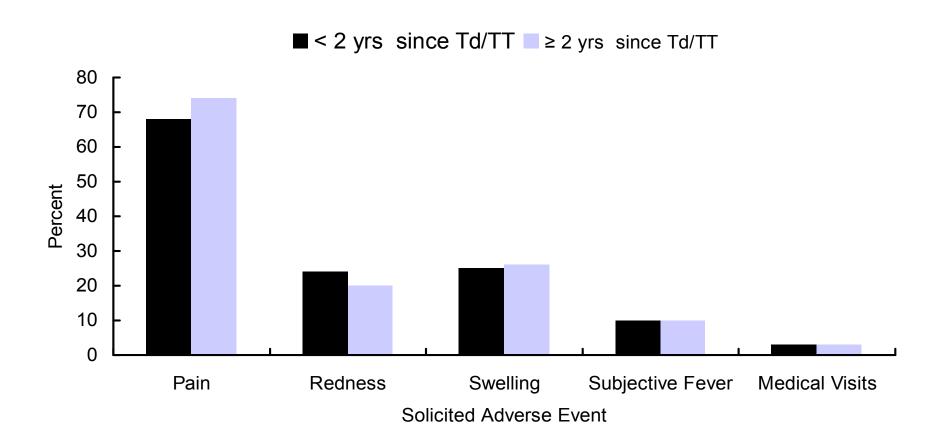
Very few contra-indications

- 1. A confirmed anaphylactic reaction to the vaccine or its constituants
- 2. Immunosuppression (live vaccines)
- Check Guidelines & manufacturer's data sheet (SmPC)

No need to restart schedule



Tdap Adverse Event Rates by Interval Since Previous Td/TT



New Tdap Recommendations

- Tdap can be administered regardless of the interval since the last tetanus or diphtheria containing vaccine
- While longer intervals between Td and Tdap vaccination could decrease local reactions, benefits of protection outweigh the potential risk for adverse events



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Childhood Leaflets Translated

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Home > Healthcare Professionals > Guidelines for late entrants

Immunisation Schedule

National Childhood Vaccination Schedule

The link shows the immunisation schedule used in each european country.

http://www.euvac.net/graphics/euvac/vaccination/vaccination.html

This link can be used to look up immuninisation schedules across the world

http://www.who.int/vaccines/globalsummary/immunization/Scheduleselect.cfm

Schedule for Late Entrants



185kb

Guidelines for Late entrants to the Irish Health Care Programme Please note relevant amendments to the Immunisation Guidelines for Ireland 2008 are currently in print and will be issued shortly

Created 24/08/2010

Modified Tue, 24 Aug 2010 15:24:06 IST

This section was updated on 24th August 2010



The country profile sheet provides ample hyperlinks.

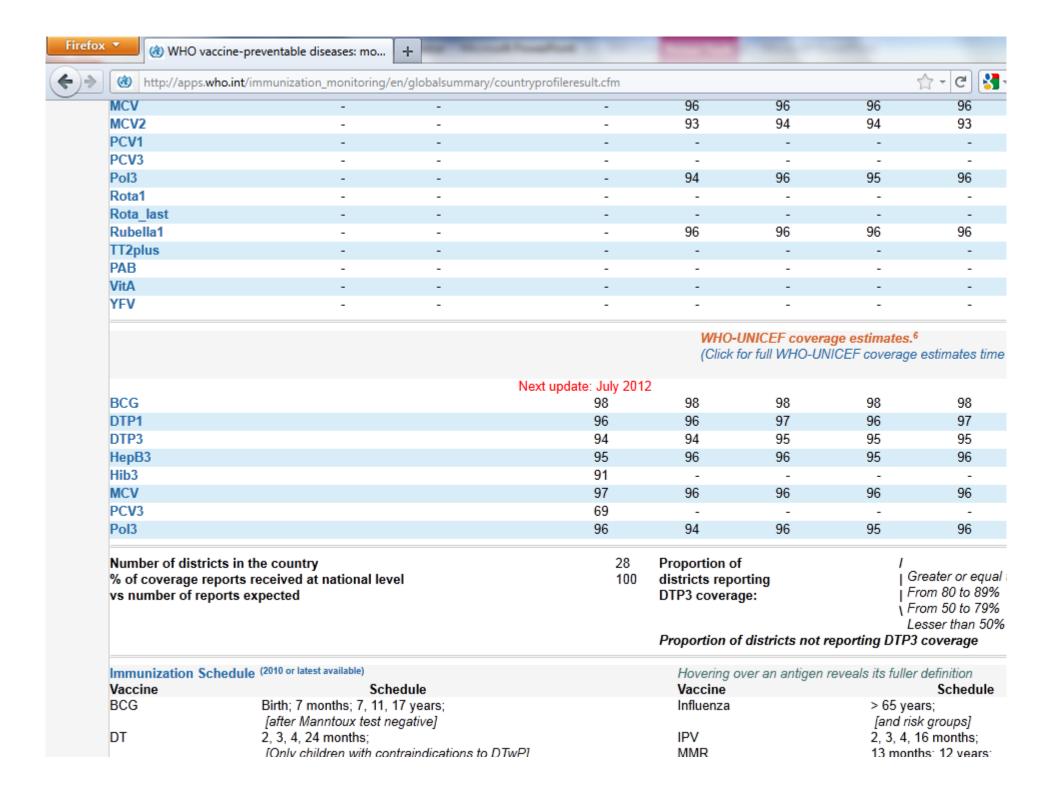
Every page section, subscripted title, and indicator, has a balloon popup associated to it. It saves from scrolling down to the footnote.

Back to immunization surveillance, assesment and monitoring data

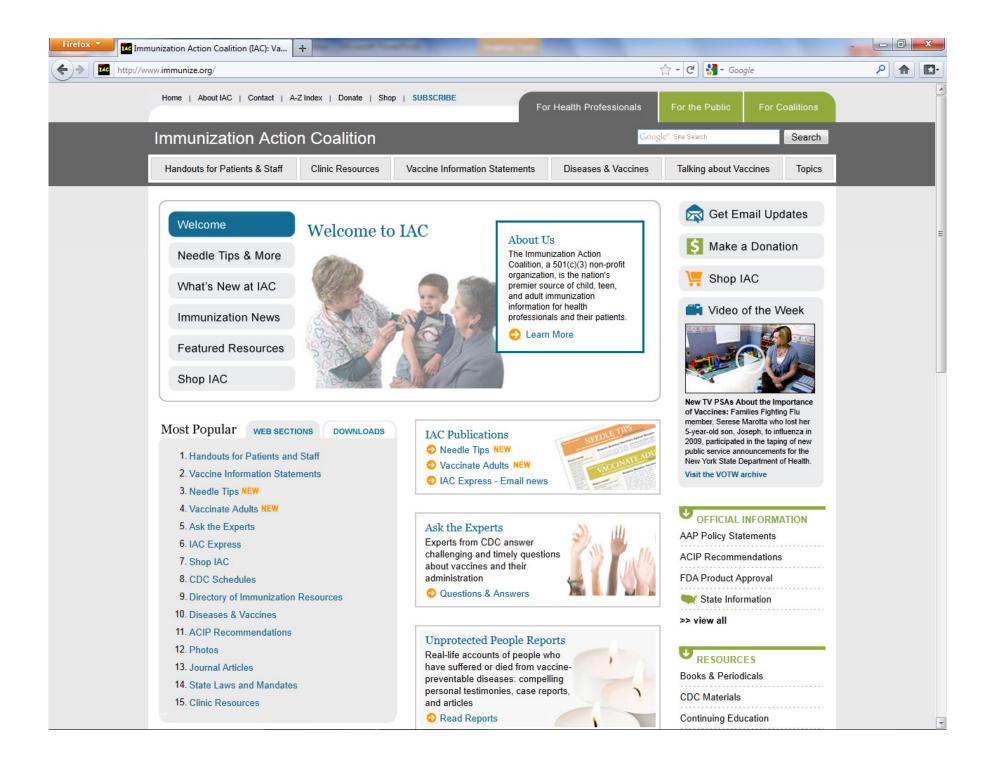
WHO Vaccine Preventable Diseases Monitoring System 2011 Global summary Last update: 22 July 2011 (data as of 20-July-2011) Next overall update: August 2011 Country profile selection centre: Global AFR AMR EMR EUR SEAR WPR Afghanistan Albania Algeria Andorra Angola Antigua and Barbuda Argentina Armenia Australia Austria Azerbaijan Bahamas Layout style: Colourful O Gray ○ White OK with the selection. Generate profile

Page sections, section titles, entries (ie. disease/antigens) can also be hyperlinks.

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Suggested rules

- Plan the catch-up on the basis of the available, documented, evidence of previous vaccination.
- Vaccine doses should not be given at less than the minimal intervals or age
- Doses administered earlier than the minimum interval or age are not valid.
- With catch-up schedule the interval between doses may be reduced.
- The numbers of doses may reduce with age (e.g PCV).
- Never restart schedule, regardless of the interval.
- If more than one vaccine is overdue, it may be appropriate to give all the vaccines at one visit.
- Schedule next visit after the appropriate minimal interval (eg. two months between first and second dose, and second and third doses of DTPacontaining vaccines).
- The optimal intervals recommended should be used once the child is back to the recommended vaccine and dose number for their age.

Useful websites

- Advisory Committee on Immunization Practices (USA) www.cdc.gov/vaccines/recs/acip/.
- American Academy of Paediatrics. 2009 Report of the Committee on Infectious Diseases The Red Book. http://aapredbook.aappublications.org/
- Australian Immunisation Handbook, Ninth Edition 2008.
 http://www.health.gov.au/internet/immunise/publishing.nsf/Content/Handbook-home
- Canadian Immunisation Guide Seventh Edition 2006.
 - http://www.phac-aspc.gc.ca/publicat/cig-gci/index-eng.php
- Centre for Disease Control Epidemiology and Prevention of Vaccine-Preventable Diseases Pink book
 11th edition http://www.cdc.gov/vaccines/pubs/pinkbook/default.htm
- Department of Health UK. November 2006. Immunisation against infectious disease.
 www.dh.gov.uk/en/Policyandguidance/Healthandsocialcaretopics/Greenbook/DH 4097254
- EUVACNETwww.euvac.net/graphics/euvac/index.html
- Health Protection Agency UK. www.hpa.org.uk/
- Health Protection Surveillance Centre, Ireland. <u>www.hpsc.ie</u>
- Immunization Action Coalition. <u>www.immunize.org</u>
- Joint Committee on Vaccination and Immunisation UK. http://www.dh.gov.uk/ab/jcvi/index.htm
- Royal College of Physicians of Ireland. Immunisation Guidelines for Ireland. Available at www.hpsc.ie
- World Health Organisation. www.who.int/vaccines/GlobalSummary/Immunization/ScheduleSelect.cfm