

Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger

UNITED STATES
2019

Vaccines in the Child and Adolescent Immunization Schedule*

| Vaccines | Abbreviations | Trade names |
|---|--|--------------------------------|
| Diphtheria, tetanus, and acellular pertussis vaccine | DTaP | Daptacel Infanrix |
| Diphtheria, tetanus vaccine | DT | No Trade Name |
| <i>Haemophilus influenzae</i> type b vaccine | Hib (PRP-T) Hib (PRP-OMP) | ActHIB Hiberix PedvaxHIB |
| Hepatitis A vaccine | HepA | Havrix Vaqta |
| Hepatitis B vaccine | HepB | Engerix-B Recombivax HB |
| Human papillomavirus vaccine | HPV | Gardasil 9 |
| Influenza vaccine (inactivated) | IIV | Multiple |
| Influenza vaccine (live, attenuated) | LAIV | FluMist |
| Measles, mumps, and rubella vaccine | MMR | M-M-R II |
| Meningococcal serogroups A, C, W, Y vaccine | MenACWY-D MenACWY-CRM | Menactra Menveo |
| Meningococcal serogroup B vaccine | MenB-4C MenB-FHbp | Bexsero Trumenba |
| Pneumococcal 13-valent conjugate vaccine | PCV13 | Prevnar 13 |
| Pneumococcal 23-valent polysaccharide vaccine | PPSV23 | Pneumovax |
| Poliovirus vaccine (inactivated) | IPV | IPOl |
| Rotavirus vaccine | RV1 RV5 | Rotarix RotaTeq |
| Tetanus, diphtheria, and acellular pertussis vaccine | Tdap | Adacel Boostrix |
| Tetanus and diphtheria vaccine | Td | Tenivac Td vaccine |
| Varicella vaccine | VAR | Varivax |
| Combination Vaccines (Use combination vaccines instead of separate injections when appropriate) | | |
| DTaP, hepatitis B, and inactivated poliovirus vaccine | DTaP-HepB-IPV | Pediarix |
| DTaP, inactivated poliovirus, and <i>Haemophilus influenzae</i> type b vaccine | DTaP-IPV/Hib | Pentacel |
| DTaP and inactivated poliovirus vaccine | DTaP-IPV | Kinrix Quadracel |
| Measles, mumps, rubella, and varicella vaccines | MMRV | ProQuad |

*Administer recommended vaccines if immunization history is incomplete or unknown. Do not restart or add doses to vaccine series for extended intervals between doses. When a vaccine is not administered at the recommended age, administer at a subsequent visit. The use of trade names is for identification purposes only and does not imply endorsement by the ACIP or CDC.


How to use the child/adolescent immunization schedule

- 1** Determine recommended vaccine by age (**Table 1**)
- 2** Determine recommended interval for catch-up vaccination (**Table 2**)
- 3** Assess need for additional recommended vaccines by medical condition and other indications (**Table 3**)
- 4** Review vaccine types, frequencies, intervals, and considerations for special situations (**Notes**)

Recommended by the Advisory Committee on Immunization Practices (www.cdc.gov/vaccines/acip) and approved by the Centers for Disease Control and Prevention (www.cdc.gov), American Academy of Pediatrics (www.aap.org), American Academy of Family Physicians (www.aafp.org), and American College of Obstetricians and Gynecologists (www.acog.org).

Report

- Suspected cases of reportable vaccine-preventable diseases or outbreaks to your state or local health department
- Clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or (800-822-7967)

 Download the CDC Vaccine Schedules App for providers at www.cdc.gov/vaccines/schedules/hcp/schedule-app.html.

Helpful information

- Complete ACIP recommendations: www.cdc.gov/vaccines/hcp/acip-recs/index.html
- General Best Practice Guidelines for Immunization: www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html
- Outbreak information (including case identification and outbreak response), see Manual for the Surveillance of Vaccine-Preventable Diseases: www.cdc.gov/vaccines/pubs/surv-manual



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