Age 9–16 years living in dengue endemic areas
Dose 1 at age 12–14 months:
5-dose series at age 2, 4, 6, 15–18 months, 4–6 years

Anatomic or functional asplenia (including sickle cell disease):
Vaccine doses administered ≤4 days before the minimum age or
Unvaccinated at age 15–59 months:
1 dose administered at age 15 months or older:
Hematopoietic stem cell transplant (HSCT):
2 doses of PedvaxHIB® before age 12 months:
Previously unvaccinated children age 60 months or older who
are not considered high risk: Do not require catch-up vaccination
For other catch-up guidance, see Table 2. Vaxelis® can be used for catch-up vaccination in children less than age 5 years. Follow the catch-up schedule even if Vaxelis® is used for one or more doses. For detailed information on use of Vaxelis® see www.cdc.gov/mmwr/volumes/69/wr/mm6905as.htm.

COVID-19 Vaccination
COVID-19 vaccines are recommended for use within the scope of the Emergency Use Authorization or Biologics License Application for the particular vaccine. ACIP recommendations for the use of COVID-19 vaccines can be found at www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html.
CDC’s interim clinical considerations for use of COVID-19 vaccines can be found at www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html.

• Consult relevant ACP statements for detailed recommendations at www.cdc.gov/vaccines/hcp/acip-recs/index.html.
• For calculating intervals between doses, 4 weeks = 28 days. Intervals of ≥4 months are determined by calendar months.
• Within a number range (e.g., 12–18), a dash (–) should be read as “through.”
• Vaccine doses administered ≤4 days before the minimum age or interval are considered valid. Doses of any vaccine administered ≤5 days earlier than the minimum age or minimum interval should not be counted as valid and should be repeated as age appropriate. The repeat dose should be spaced after the invalid dose by the recommended minimum interval. For further details, see Table 3-1, Recommended and minimum ages and intervals between vaccine doses, in General Best Practice Guidelines for Immunization at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html.
• Information on travel vaccination requirements and recommendations is available at www.cdc.gov/travel/.
• For information about vaccination in the setting of a vaccine-preventable disease outbreak, contact your state or local health department.
• The National Vaccine Injury Compensation Program (VICP) is a no-fault alternative to the traditional legal system for resolving vaccine injury claims. All routine child and adolescent vaccines are covered by VICP except for pneumococcal polysaccharide vaccine (PPSV23). For more information, see www.hrsa.gov/vaccinecompensation/index.html.

Additional information

Dengue vaccination
(minimum age: 9 years)

Routine vaccination
• Age 9–16 years living in dengue endemic areas AND have laboratory confirmation of previous dengue infection
- 3-dose series administered at 0, 6, and 12 months
- Endemic areas include Puerto Rico, American Samoa, US Virgin Islands, Federated States of Micronesia, Republic of Marshall Islands, and the Republic of Palau. For updated guidance on dengue endemic areas and pre-vaccination laboratory testing see www.cdc.gov/mmwr/volumes/70/rr/rr7006a1.htm5_cid=rr7006a1_w and www.cdc.gov/dengue/vaccine/hcp/index.html.

Diphtheria, tetanus, and pertussis (DTaP) vaccination
(minimum age: 6 weeks [4 years for Kinrix® or Quadcit®])

Routine vaccination
• 5-dose series at age 2, 4, 6, 15–18 months, 4–6 years
- Prospectively: Dose 4 may be administered as early as age 12 months if at least 6 months have elapsed since dose 3.
- Retrospectively: A 4th dose that was inadvertently administered as early as age 12 months may be counted if at least 4 months have elapsed since dose 3.

Catch-up vaccination
• Dose 5 is not necessary if dose 4 was administered at age 4 years or older and at least 6 months after dose 3.
• For other catch-up guidance, see Table 2.

Special situations
• Wound management in children less than age 7 years with history of 3 or more doses of tetanus-toxoid-containing vaccine: For all wounds except clean and minor wounds, administer DTaP if more than 5 years since last dose of tetanus-toxoid-containing vaccine. For detailed information, see www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm.

Haemophilus influenzae type b vaccination
(minimum age: 6 weeks)

Routine vaccination
• ActHIB®, Hibexir®, Pentacel®, or Vaxelis®: 4-dose series (3 dose primary series at age 2, 4, and 6 months, followed by a booster dose* at age 12–15 months)
  *Vaxelis® is not recommended for use as a booster dose. A different Hib-containing vaccine should be used for the booster dose.
• PedvaxHIB®: 3-dose series (2-dose primary series at age 2 and 4 months, followed by a booster dose at age 12–15 months)

Catch-up vaccination
• Dose 1 at age 7–11 months: Administer dose 2 at least 4 weeks later and dose 3 (final dose) at age 12–15 months or 8 weeks after dose 2 (whichever is later).
• Dose 1 at age 12–14 months: Administer dose 2 (final dose) at least 8 weeks after dose 1.
• Dose 1 before age 12 months and dose 2 before age 15 months: Administer dose 3 (final dose) at least 8 weeks after dose 2.
• 2 doses of PedvaxHIB® before age 12 months: Administer dose 3 (final dose) at 12–59 months and at least 8 weeks after dose 2.
• 1 dose administered at age 15 months or older: No further doses needed
• Unvaccinated at age 15–59 months: Administer 1 dose.
• Previously unvaccinated children age 60 months or older who are not considered high risk: Do not require catch-up vaccination For other catch-up guidance, see Table 2. Vaxelis® can be used for catch-up vaccination in children less than age 5 years. Follow the catch-up schedule even if Vaxelis® is used for one or more doses. For detailed information on use of Vaxelis® see www.cdc.gov/mmwr/volumes/69/wr/mm6905as.htm.

Notes
For vaccination recommendations for persons ages 19 years or older, see the Recommended Adult Immunization Schedule, 2022.

COVID-19 Vaccination
COVID-19 vaccines are recommended for use within the scope of the Emergency Use Authorization or Biologics License Application for the particular vaccine. ACIP recommendations for the use of COVID-19 vaccines can be found at www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html.

For vaccination of persons with immunodeficiencies, see Table 8-1, Vaccination of persons with primary and secondary immunodeficiencies, in General Best Practice Guidelines for Immunization at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html.

Information on travel vaccination requirements and recommendations is available at www.cdc.gov/travel/.

For information about vaccination in the setting of a vaccine-preventable disease outbreak, contact your state or local health department.

The National Vaccine Injury Compensation Program (VICP) is a no-fault alternative to the traditional legal system for resolving vaccine injury claims. All routine child and adolescent vaccines are covered by VICP except for pneumococcal polysaccharide vaccine (PPSV23). For more information, see www.hrsa.gov/vaccinecompensation/index.html.

For vaccination recommendations for persons ages 19 years or older, see the Recommended Adult Immunization Schedule, 2022.