Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2021

**Measles, mumps, and rubella vaccination**
(minimum age: 12 months for routine vaccination)

**Routine vaccination**
- 2-dose series at 12–15 months, 4–6 years
- Dose 2 may be administered as early as 4 weeks after dose 1.

**Catch-up vaccination**
- Unvaccinated children and adolescents: 2-dose series at least 4 weeks apart
- The maximum age for use of MMRV is 12 years.

**Special situations**

- **International travel**
  - Infants age 6–11 months: 1 dose before departure; revaccinate with 2-dose series at age 12–15 months (12 months for children in high-risk areas) and dose 2 as early as 4 weeks later.
  - Unvaccinated children age 12 months or older: 2-dose series at least 4 weeks apart before departure

**Meningococcal serogroup A,C,W,Y vaccination**
(minimum age: 2 months [MenACWY-CRM, Menveo], 9 months [MenACWY-D, Menactra], 2 years [MenACWY-TT, MenQuadfi])

**Routine vaccination**
- 2-dose series at 11–12 years, 16 years

**Catch-up vaccination**
- Age 13–15 years: 1 dose now and booster at age 16–18 years (minimum interval: 8 weeks)
- Age 16–18 years: 1 dose

**Special situations**
**Anatomic or functional asplenia (including sickle cell disease)**, HIV infection, persistent complement component deficiency, complement inhibitor (e.g., eculizumab, ravulizumab) use:
- **Menveo**
  - Dose 1 at age 8 weeks: 4-dose series at 2, 4, 6, 12 months
  - Dose 1 at age 3–6 months: 3- or 4- dose series (dose 2 [and dose 3 if applicable] at least 8 weeks after previous dose until a dose is received at age 7 months or older, followed by an additional dose at least 12 weeks later and after age 12 months)
- **Menactra**
  - Dose 1 at age 7–23 months: 2-dose series (dose 2 at least 12 weeks after dose 1 and after age 12 months)
  - Dose 1 at age 24 months or older: 2-dose series at least 8 weeks apart

**Menactra**
- Persistent complement component deficiency or complement inhibitor use:
  - Age 9–23 months: 2-dose series at least 12 weeks apart
  - Age 24 months or older: 2-dose series at least 8 weeks apart
- **Anatomic or functional asplenia, sickle cell disease, or HIV infection:**
  - Age 9–23 months: Not recommended
  - Age 24 months or older: 2-dose series at least 8 weeks apart
  - **Menactra** must be administered at least 4 weeks after completion of PCV13 series.

**MenQuadfi**
- Dose 1 at age 24 months or older: 2-dose series at least 8 weeks apart

**Travel in countries with hyperendemic or epidemic meningococcal disease, including countries in the African meningitis belt or during the Hajj** (www.cdc.gov/travel/)
- Children less than age 24 months:
  - **Menveo** (age 2–23 months)
    - Dose 1 at age 8 weeks: 4-dose series at 2, 4, 6, 12 months
    - Dose 1 at age 3–6 months: 3- or 4- dose series (dose 2 [and dose 3 if applicable] at least 8 weeks after previous dose until a dose is received at age 7 months or older, followed by an additional dose at least 12 weeks later and after age 12 months)
  - Dose 1 at age 7–23 months: 2-dose series (dose 2 at least 12 weeks after dose 1 and after age 12 months)
  - **Menactra** (age 9–23 months)
    - 2-dose series (dose 2 at least 12 weeks after dose 1; dose 2 may be administered as early as 8 weeks after dose 1 in travelers)
- Children age 2 years or older: 1 dose Menveo, Menactra, or MenQuadfi

**First-year college students who live in residential housing (if not previously vaccinated at age 16 years or older) or military recruits:**
- 1 dose Menveo, Menactra, or MenQuadfi

**Adolescent vaccination of children who received MenACWY prior to age 10 years:**
- Children for whom boosters are recommended because of an ongoing increased risk of meningococcal disease (e.g., those with complement deficiency, HIV, or asplenia): Follow the booster schedule for persons at increased risk.
- Children for whom boosters are not recommended (e.g., a healthy child who received a single dose for travel to a country where meningococcal disease is endemic): Administer MenACWY according to the recommended adolescent schedule with dose 1 at age 11–12 years and dose 2 at age 16 years.

Note: Menactra should be administered either before or at the same time as DTaP. For MenACWY booster dose recommendations for groups listed under “Special situations” and in an outbreak setting and additional meningococcal vaccination information, see www.cdc.gov/mmwr/volumes/69/rr/rr6909a1.htm.

**Meningococcal serogroup B vaccination**
(minimum age: 10 years [MenB-4C, Bexsero; MenB-FHbp, Trumenba])

**Shared clinical decision-making**
- Adolescents not at increased risk age 16–23 years (preferred age 16–18 years) based on shared clinical decision-making:
  - **Bexsero**: 2-dose series at least 1 month apart
  - **Trumenba**: 2-dose series at least 6 months apart; if dose 2 is administered earlier than 6 months, administer a 3rd dose at least 4 months after dose 2.

**Special situations**

- Anatomic or functional asplenia (including sickle cell disease), persistent complement component deficiency, complement inhibitor (e.g., eculizumab, ravulizumab) use:
  - **Bexsero**: 2-dose series at least 1 month apart
  - **Trumenba**: 3-dose series at 0, 1–2, 6 months

**Notes**

- **Menveo**, **Menactra**, or **MenQuadfi** are indicated, administer PCV13 first. PCV13 and PPSV23 should not be administered during same visit.

**MenB booster dose recommendations** for groups listed under “Special situations” and in an outbreak setting and additional meningococcal vaccination information, see www.cdc.gov/mmwr/volumes/69/rr/rr6909a1.htm.

**Pneumococcal vaccination**
(minimum age: 6 weeks [PCV13], 2 years [PPSV23])

**Routine vaccination with PCV13**
- 4-dose series at 2, 4, 6, 12–15 months

**Catch-up vaccination with PCV13**
- 1 dose for healthy children age 24–59 months with any incomplete* PCV13 series
- For other catch-up guidance, see Table 2.

**Special situations**

- **Underlying conditions below:** When both PCV13 and PPSV23 are indicated, administer PCV13 first. PCV13 and PPSV23 should not be administered during same visit.

- **Chronic heart disease (particularly cyanotic congenital heart disease and cardiac failure); chronic lung disease (including asthma treated with high-dose, oral corticosteroids); diabetes mellitus:**
  - Age 2–5 years
    - Any incomplete* series with:
      - 3 PCV13 doses: 1 dose PCV13 (at least 8 weeks after any prior PCV13 dose)
      - Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
    - No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)
  - Age 6–18 years
    - No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)

- **Cerebrospinal fluid leak, cochlear implant:**
  - Age 2–5 years
    - Any incomplete* series with:
      - 3 PCV13 doses: 1 dose PCV13 (at least 8 weeks after any prior PCV13 dose)
      - Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
    - No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)

*Incomplete* series includes:
- Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)