

2013 CATCH-UP SCHEDULE FOR CHILDREN AGES 4 MONTHS THROUGH 6 YEARS*

VACCINE	MINIMUM AGE FOR DOSE 1	MINIMUM INTERVAL BETWEEN DOSES			
		DOSE 1 TO DOSE 2	DOSE 2 TO DOSE 3	DOSE 3 TO DOSE 4	DOSE 4 TO DOSE 5
HepB ¹	Birth	4 weeks	8 weeks and at least 16 weeks after 1st dose; minimum age for the final dose is 24 weeks		
RV ²	6 wks	4 weeks	4 weeks²		
DTaP ³	6 wks	4 weeks	4 weeks	6 months	6 mos³
Hib ⁵	6 wks	4 weeks if 1st dose given at age <12 mos 8 weeks (as final dose) if 1st dose given at age 12–14 mos No further doses needed if 1st dose given at age ≥15 mos	4 weeks⁵ if current age <12 mos 8 weeks (as final dose)⁵ if current age ≥12 mos and 1st dose given at age <12 mos and 2nd dose given at age <15 mos No further doses needed if previous dose given at age ≥15 mos	8 weeks (as final dose) This dose only necessary for ages 12 mos–59 mos who received 3 doses at age <12 mos	
PCV ⁶	6 wks	4 weeks if 1st dose given at age <12 mos 8 weeks (as final dose for healthy children) if 1st dose given at age ≥12 mos or current age 24–59 mos No further doses needed for healthy children if 1st dose given at age ≥24 mos	4 weeks if current age <12 mos 8 weeks (as final dose for healthy children) if current age ≥12 mos No further doses needed for healthy children if previous dose given at age ≥24 mos	8 weeks (as final dose) This dose only necessary for ages 12 mos–59 mos who received 3 doses at age <12 mos or for high-risk children who received 3 doses at any age	
IPV ⁷	6 wks	4 weeks	4 weeks	6 months⁷ minimum age 4 years for final dose	
MCV4 ¹³	6 wks	8 weeks¹³	see footnote 13	see footnote 13	
MMR ⁹	12 mos	4 weeks			
VAR ¹⁰	12 mos	3 months			
HepA ¹¹	12 mos	6 months			

The footnotes and catch-up schedule for children ages 7–18 years can also be found in this section.

2013 CATCH-UP SCHEDULE FOR CHILDREN AGES 7-18 YEARS*

VACCINE	MINIMUM AGE FOR DOSE 1	MINIMUM INTERVAL BETWEEN DOSES			
		DOSE 1 TO DOSE 2	DOSE 2 TO DOSE 3	DOSE 3 TO DOSE 4	DOSE 4 TO DOSE 5
Td/Tdap⁴	7 yrs⁴	4 weeks	4 weeks if 1st dose given at age <12 mos 6 months if 1st dose given at age ≥12 mos	6 months if 1st dose given at age <12 mos	
HPV¹²	9 yrs	Routine dosing intervals are recommended¹²			
HepA¹¹	12 mos	6 months			
HepB¹	Birth	4 weeks	8 weeks (and at least 16 wks after 1st dose)		
IPV⁷	6 wks	4 weeks	4 weeks⁷	6 months⁷	
MCV4¹³	6 wks	8 weeks¹³			
MMR⁹	12 mos	4 weeks			
VAR¹⁰	12 mos	3 months if person is <13 years 4 weeks if person is ≥13 years			

The catch-up schedule for children ages 4 months through 6 years can also be found in this section.

Source: Centers for Disease Control and Prevention.

Available at: <http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>. Accessed on 02/2013.

FOOTNOTES FOR CHILDREN AND ADOLESCENTS CATCH-UP SCHEDULES, 2013

*The tables provide catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age. **Always use this table in conjunction with the child and adolescent immunization schedules ("Recommended Immunization Schedule for Persons Age 0 Through 18 Years") and their respective footnotes.**

- Hepatitis B (HepB) vaccine. (Minimum age: birth)**
 - Unvaccinated persons should complete a 3-dose series.
 - A 2-dose series (doses separated by at least 4 months) of adult formulation Recombivax HB is licensed for use in children aged 11 through 15 years.
- Rotavirus (RV) vaccines (Minimum age: 6 weeks for both RV-1 [Rotarix] and RV-5 [RotaTeq]).**
 - The maximum age for the first dose in the series is 14 weeks, 6 days.
 - Vaccination should not be initiated for infants aged 15 weeks 0 days or older.
 - The maximum age for the final dose in the series is 8 months, 0 days.
 - If RV-1 (Rotarix) is administered for the first and second doses, a third dose is not indicated.
- Diphtheria and tetanus toxoids and acellular pertussis (DTaP) vaccine. (Minimum age: 6 weeks)**
 - The fifth (booster) dose of DTaP vaccine is not necessary if the fourth dose was administered at age 4 years or older.
- Tetanus and diphtheria toxoids and acellular pertussis (Tdap) vaccine. (Minimum age: 10 years for Boostrix, 11 years for Adacel).**
 - Persons aged 7 through 10 years who are not fully immunized with the childhood DTaP vaccine series, should receive Tdap vaccine as the first dose in the catch-up series; if additional doses are needed, use Td vaccine. For these children, an adolescent Tdap vaccine should not be given.
 - Persons aged 11 through 18 years who have not received Tdap vaccine should receive a dose followed by tetanus and diphtheria toxoids (Td) booster doses every 10 years thereafter.
 - An inadvertent dose of DTaP vaccine administered to children aged 7 through 10 years can count as part of the catch-up series. This dose can count as the adolescent Tdap dose, or the child can later receive a Tdap booster dose at age 11-12 years.
- Haemophilus influenzae type b (Hib) conjugate vaccine. (Minimum age: 6 weeks)**
 - If dose 1 was administered at ages 12-14 months, administer booster (as final dose) at least 8 weeks after dose 1.
 - If the first 2 doses were PRP-OMP (PedvaxHIB or Comvax), and were administered at age 11 months or younger, the third (and final dose should be administered at age 12 through 15 months and at least 8 weeks after the second dose.
 - If the first dose was administered at age 7 through 11 months, administer the second dose at least 4 weeks later and a final dose at age 12 through 15 months, regardless of Hib vaccine (PRP-T or PRP-OMP) used for first dose.
 - For unvaccinated children aged 15 months or older, administer only 1 dose.

- Pneumococcal conjugate vaccine (PCV). (Minimum age: 6 weeks)**
 - Administer 1 dose of PCV13 to all healthy children aged 24 through 59 months who are not completely vaccinated for their age.
- Inactivated poliovirus vaccine (IPV). (Minimum age: 6 weeks)**
 - In the first 6 months of life, minimum age and minimum intervals are only recommended if the person is at risk for imminent exposure to circulating poliovirus (i.e., travel to a polio-endemic region or during an outbreak).
 - If 4 or more doses are administered before age 4 years, an additional dose should be administered at age 4 through 6 years.
 - A fourth dose is not necessary if the third dose was administered at age 4 years or older and at least 6 months after the previous dose.
 - If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age.
 - IPV is not routinely recommended for U.S. residents aged 18 years or older.
- Influenza vaccines. (Minimum age: 6 months for inactivated influenza vaccine (IIV); 2 years for live, attenuated influenza vaccine [LAIV]).**
 - See "RECOMMENDED IMMUNIZATION SCHEDULE FOR AGES 0 THROUGH 18 YEARS" for further guidance.
- Measles, mumps, and rubella (MMR) vaccine. (Minimum age: 12 months for routine vaccination)**
 - Ensure that all school-aged children and adolescents have had 2 doses of MMR vaccine; the minimum interval between the 2 doses is 4 weeks.
- Varicella (VAR) vaccine. (Minimum age: 12 months)**
 - Ensure that all persons aged 7 through 18 years without evidence of immunity (see MMWR 2007;56 [No. RR-4], available at <http://www.cdc.gov/mmwr/pdf/rr/rr5604.pdf>) have 2 doses of varicella vaccine. For children aged 7 through 12 years the recommended minimum interval between doses is 3 months (if the second dose was administered at least 4 weeks after the first dose, it can be accepted as valid); for persons aged 13 years and older, the minimum interval between doses is 4 weeks.
- Hepatitis A vaccine (HepA). (Minimum age: 12 months)**
 - The minimum interval between the two doses is 6 months.
- Human papillomavirus (HPV) vaccines (HPV4 [Gardasil] and HPV2 [Cervarix]). (Minimum age: 9 years)**
 - Administer the vaccine series to females (either HPV2 or HPV4) and males (HPV4) at age 13 through 18 years if not previously vaccinated.
 - Use recommended routine dosing intervals (see above) for vaccine series catch-up.
 - The minimum interval between the two doses is 6 months.
- Meningococcal conjugate vaccines (MCV). (Minimum age: 6 weeks for Hib-MenC9, 9 months for Menactra [MCV4-D], 2 years for Menveo [MCV4-CRM])**
 - Administer MCV4 vaccine at age 13 through 18 years if not previously vaccinated.
 - If the first dose is administered at age 13 through 15 years, a booster dose should be administered at age 16 through 18 years with a minimum interval of at least 8 weeks between doses.
 - If the first dose is administered at age 16 years or older, a booster dose is not needed.

(continued)

2013 CATCH-UP SCHEDULE FOR CHILDREN

Changes in the Schedule Since Last Release

- Abbreviations for influenza vaccine were updated with the anticipation of quadrivalent vaccine for the 2013–14 influenza season.
- Pneumococcal polysaccharide vaccine (PPSV23) was added to the chart.
- Footnotes were combined and standardized formatting was used to provide recommendations for each vaccine related to routine vaccination, catch-up vaccination, and vaccination of persons with high-risk medical conditions or under special circumstances.
- MCV4 footnotes were updated to reflect recent recommendations.
- Tetanus and diphtheria toxoids and acellular pertussis (Tdap) vaccine footnotes were updated to reflect recent recommendations.
- Influenza vaccine footnotes were updated to provide dosing guidance for children aged 6 months through 8 years for the 2012–13 and 2013–14 influenza seasons.
- MCV4 vaccine minimum ages and intervals were updated in, "Catch-up immunization schedule for persons aged 4 months through 18 years who start late or who are more than 1 month behind—United States, 2013," to reflect licensure of Hib-MenCY vaccine. (Rev. 2/2013)