2023 CHILDHOOD STANDARD VACCINE SCHEDULE (ages birth through 18 years)

*IMPORTANT: Use this resource in conjunction with the CDC Recommended Immunization Schedules: http://www.cdc.gov/vaccines/schedules/index.html

Vaccine	Birth	2m	4m	6m	8m	12-15m	18m	19-23m	4-6yrs	7-8yrs	9-10yrs	11-12yrs	14-18yrs
RSV ¹	Nirsevimab 1 dose See footnote ¹			See footnote ¹									
Hepatitis B ²	Нер В												
DTaP ³ and Tdap ³		Pediarix®	Pediarix®	Pediarix®		Infanrix®			W			Boostrix®	
Inactivated Polio ⁴									Kinrix [®]				
Rotavirus ⁵		RotaTeq [®]	RotaTeq®	RotaTeq®									
Pneumococcal conjugate ⁶		Prevnar20°	Prevnar20°	Prevnar20°		Prevnar20°							
Hib ⁷		PedvaxHib®	PedvaxHib®			PedvaxHib®							
Influenza ⁸					Annual vaccination 1 or 2 doses					Annual vaccination 1 dose only			
Covid-19 ⁹					Updated Moderna or Pfizer 1 or more doses (See footnote ⁹) Updated					dated Moderna or Pfizer 1 dose			
MMR ¹⁰						MMR II [®]			MMR II®				
Varicella ¹⁰						Varivax®			Varivax®				
Hep A ¹¹						Havrix 2 dose	s, given 6 mo	onths apart					
HPV ¹²												Gardasil 9°	2-3 doses
Meningococcal ¹³	For high risk recommendations in persons age 2 months and older: see footnote ¹³									MenQuadfi [®] 1 or 2 doses			
MenB ¹³									See footnote ¹³				

- 1 RSV Monoclonal Ab: One dose of nirsevimab for all infants younger than 8 months born during or entering their first RSV season. A subsequent dose of 50mL to 200mL is recommended for Al/AN children between the ages of 8 and 19 months during or entering their second RSV season. Review the CDC's draft interim clinical considerations: Nirsevimab for further recommendations.
- 2 Hepatitis B (pediatric): Give Hep B monovalent within 12-24 hours of birth (based on mother's HBsAg status) and for doses administered before age 6 weeks; infants who did not receive a birth dose should begin the series as soon as possible: review CDC immunization schedules. Use Pediarix* to complete the Hep B series. Final Hep B dose given no earlier than 24 weeks of age, and at least 8 weeks after prior dose & 16 weeks after first dose. Four doses of Hep B is permitted when a combination vaccine containing Hepatitis B (Pediarix*) is used after the birth dose.
- **3 DTaP**: min. age 42 days. Do not use Pediarix* (DTaP-Hep B-IPV) for DTaP dose 4 and 5 or if child is ≥7 years old. Give DTaP dose 4 at 12 months of age if 6-month interval after DTaP dose 3. Do not need DTaP dose 5 if DTaP dose 4 was given at 4 years of age or older and at least 6 months after DTaP dose 3. Kinrix* (DTaP-IPV) is for 4 year to 6 year olds only. **3 Tdap** (Adacel* min. age 4 yrs) (Boostrix* min. age 10 yrs) One dose Tdap at 11-12 years and one dose for each pregnancy. Give one dose Tdap to children ages 7-10 who did not receive 5 doses DTaP.
- 4 Inactivated Poliovirus: min. age 42 days. Pediarix is used for doses 1, 2 and 3 of IPV. Final IPV dose must be given at 4 years of age or older and at least 6 months after previous IPV dose.
- 5 Rotavirus (RotaTeq*): min. age 42 days. Maximum age for first dose is 14 weeks, 6 days. Do not start series if age ≥15 weeks, 0 days. Give all doses by age 8 months, 0 days.
- **6 Pneumococcal (pediatric)**: PCV20 (Prevnar20*): min. age 42 days. PPSV23 (Pneumovax23*) min. age 2 yrs. For children with certain underlying medical conditions or other risk factors, when both PCV13 and PPSV23 are recommended, give PCV13 first; PCV13 and PPSV23 should not be administered during the same visit; review CDC immunization schedules for recommendations and dose intervals based on underlying medical conditions or other risk factors; and, additional details in CDC MMWR: Pneumococcal Vaccine.
- 7 Haemophilus influenza: Hib (PRP-OMP) (PedvaxHib*): min. age 42 days. For children and adults with underlying medical conditions and other risk factors: review CDC immunization schedules and additional details in CDC MMWR: Hib Vaccine.
- 8 Influenza: min. age 6 months. Children 6 months to 8 years of age receiving their first influenza vaccine, who have not previously received a total of two or more doses in their lives, or whose influenza vaccination history is unknown need two doses. For those children it is recommended to get the first dose as soon as vaccine is available, because the second needs to be given at least four weeks after the first. Review CDC immunization schedules and additional details in CDC MMWR: Influenza.
- **9 Covid-19:** *min.* age 6 mos. Children aged 6 months—5 years may need multiple doses of COVID-19 vaccine to be up to date, including at least 1 dose of updated Pfizer-BioNTech or Moderna COVID-19 vaccine, depending on the number of doses they've previously received and their age. Children aged 6 years and older should get 1 updated Pfizer-BioNTech or Moderna COVID-19 vaccine to be up to date. Additional information and details from the CDC: Interim Covid-19 Immunization Schedule.
- 10 MMR and Varicella: min. age 12 mos. Second dose of MMR and Varicella routine at 4-6 years old, catch-up through age 18 years. Give MMR and Varicella vaccine to adults with no evidence of immunity; underlying medical conditions and other risk factors: review CDC immunization schedules. MMR and Varicella vaccine contraindicated during pregnancy. If not given on the same day, there is a 4-week minimum interval between live vaccines (MMR and Varicella)
- 11 Hep A (pediatric): min. age 12 months. Two doses of Hep A vaccine given at least 6 months apart. For travel recommendations: review CDC immunization schedules.
- 12 HPV (Gardasil9*): min age 9 yrs. Routine at 11-12 years of age. Can start series at 9 years of age. If age 9-14 years at initial vaccination, 2-dose series, doses 6-12 months apart. If age 15 years or older at initial vaccination, 3-dose series at 0, 1–2, 6 months. Immunocompromised (including HIV) receive 3-dose series, even those who start the series at age 9-14 years. HPV vaccination is not recommended until after pregnancy; no intervention needed if inadvertently vaccinated while pregnant: review CDC immunization schedules.
- 13 Meningococcal: MenACWY-CRM (Menveo*): min age 2 mos. MenACWY-D (Menactra*): min. age 9 mos. MenACWY-TT (MenQuadfi*): min. age ≥2 yrs. Routine for 11-18 year olds. If first dose given at 11-15 years old, give booster at 16-18 years old, no further doses. MenB (Trumenba* or Bexsero*): min. age 10 yrs. For 16-23 year olds not at increased risk (preferred at 16-18 years), consider MenB vaccine based on shared clinical decision-making. For children with underlying conditions or other risk factors for meningococcal disease; or, precautions for MenB vaccine use in pregnancy: review CDC immunization schedules and additional details in CDC MMWR: Meningococcal Vaccine

2023 ADULT STANDARD VACCINE SCHEDULE (ages 19 and older)

*IMPORTANT: Use this resource in conjunction with the CDC Recommended Immunization Schedules

Vaccine	Name(s)	19-26yrs	27-49yrs		50-64yrs	≥65yrs			
Covid-19 ¹	Moderna or Pfizer 1 updated dose								
Influenza ²	*See 2023 Flu Protocols	1 dose annually							
Tdap and Td ³	Adacel®	1 dose Tdap during each pregnancy; 1 dose Td/Tdap for wound management							
	Boostrix [®] 1 dose Tdap, then Td or Tdap booster every 10 years								
Pneumococcal ⁴	Prevnar20 [°]	1 dose, if no prior vaccination. S	See footnote ⁴			1 dose			
Zoster ⁵	Shingrix [®]	2 doses, given 2-6 months apart							
HPV ⁶	Gardasil9 [®]	2-3 doses ⁶	See footnote ⁶						
RSV ⁷	Abrysvo [®] or Arexvy [®]	Adults aged ≥60 years: 1 dose							
Hepatitis A ⁸	Havrix [®] ,Vaqta [®] ,or Twinrix [®]	Complete a 2-, 3-, or 4- dose series. See footnote ⁸ for at risk recommendations.							
Hepatitis B ⁸	Engerix B [®] , Heplisav-B [®] or Twinrix [®]	Complete a 2-, 3-, or 4- dose series. See footnote ⁸							
MMR ⁹	MMR II®	One or two doses for adults at least 4 weeks apart, depending upon indication.							
Varicella ⁹	Varivax [®]	2 doses at least 4 weeks apart.							
MenACWY	MenQuadfi [®]	Review CDC immunization schedules for MenACWY recommendations in adults ¹⁰							
MenB ¹	Bexsero [®]	Review <u>CDC immunization schedules</u> for MenB recommendations in adults ¹⁰ .							

- 1 Covid-19 Adults should receive 1 updated Moderna or Pfizer COVID-19 (2023-2024 Formula) vaccine to be up to date. Additional information and details from the CDC: Interim Covid-19 Immunization Schedule and ANMC COVID-19 Vaccine Protocol
- 2 Influenza Updated 2023-24 influenza vaccine composition, proposed changes to the recommendations for vaccination for persons with egg allergy. Recommendations regarding timing of vaccination are unchanged from 2022-23. For additional information review ANTHC Flu vaccine protocol and CDC Summary: prevention and control of seasonal influenza with vaccines.
- 3 Tdap (Boostrix®) Give adults who have never received Tdap a single dose of Tdap. This can be given at any time, regardless of when they last got Td, then Td or Tdap booster every 10 years. Give one dose Tdap (Adacel®) during each pregnancy, preferably in early part of 27-36 weeks gestation.
- 4 Pneumococcal (adult): PCV20 (Prevnar20*), If previously immunized with PCV13 or PCV15 is used, this should be followed by one dose of PPSV23 given at least 1 year later (minimum 8 week interval can be considered for certain high risk adults); After immunization with PCV20 a dose of PPSV23 is not indicated. For adults with certain underlying medical conditions or other risk factors or, for guidance for patients who have already received a previous dose of PCV13 (Prevnar13*) and/or PPSV23 (Pneumovax23*): review CDC immunization schedules and additional details in CDC MMWR: Pneumococcal Vaccine. For additional guidance, review State of Alaska Epidemiology Bulletin Updated Adult Pneumococcal Vaccination Recommendations, 12/23/2022.
- RZV (Shingrix*): Give 2 doses RZV regardless of past episode of herpes zoster or history of zoster vaccine live ZVL (Zostavax*); give RZV ≥2 months after ZVL. There is currently no ACIP recommendation for RZV (Shingrix*) use in pregnancy; consider delaying RZV until after pregnancy, review CDC immunization schedules and additional details in CDC MMWR: Zoster Vaccine.
- 6 HPV (Gardasil9) HPV vaccination is given as a series of either 2 or 3 doses, depending on age at initial vaccination. HPV vaccination is not recommended until after pregnancy; no intervention needed if inadvertently vaccinated while pregnant schedules. Some adults age 27–45 years: Based on shared clinical decision-making, 2- or 3-dose series as above.
- 7 RSV (Abrysvo* or Arexvy*) Recommendations based on shared clinical decision-making; review CDC immunization schedules and additional details in CDC MMWR: RSV Vaccine.
- 8 Hepatitis (adult): Hep B vaccine routine for adults 19-59 years of age; adults 60 years and older may receive Hep B vaccine. Heplisav-B* is not recommended in pregnancy. Twinrix* (Hep A and Hep B combo) will be added to the adult formulary Fall 2023 (timeline TBA) For Hep A and Hep B vaccine recommendations for persons at risk and other special situations: review CDC immunization schedules and additional details in CDC MMWR: Hepatitis B Vaccine.
- 9 MMR and Varicella Give MMR and Varicella vaccine to adults with no evidence of immunity. For evidence of immunity, underlying medical conditions, and other risk factors: review CDC immunization schedules. MMR and Varicella vaccine contraindicated during pregnancy. If not given on the same day, there is a 4-week minimum interval between live vaccines.
- 10 Meningococcal MenACWY (MenQuadfi*). For children and adults with underlying conditions or other risk factors for meningococcal disease; or, precautions for MenB vaccine use in pregnancy: review CDC immunization schedules and additional details in CDC MMWR: Meningococcal Vaccine. MenB (Trumenba* or Bexsero*): min. age 10 yrs. For 16-23 year olds not at increased risk (preferred at 16-18 years), consider MenB vaccine based on shared clinical decision-making.