

Australian Childhood Immunisation Register

National Due and Overdue Rules for Childhood Immunisation

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Abbreviations

ACIR	Australian Childhood Immunisation Register
ASVS	Australian Standard Vaccination Schedule
DTPa	Diphtheria, tetanus, acellular pertussis vaccine
HepB	Hepatitis B
Hib	<i>Haemophilus influenzae</i> type B
NHMRC	National Health and Medical Research Council
NIP	National Immunisation Program
The Handbook	Australian Immunisation Handbook

Definitions

Antigen component

Part of the vaccine to which an immune response is directed.

Birth dose

A dose of hepatitis B vaccine given between birth and 7 days of age.

Combination vaccine

A vaccine that contains antigen components of more than one disease.

Handbook

The NHMRC approved Australian Immunisation Handbook (latest edition).

Hib-schedule A

A primary course of three Hib doses due at 2, 4 and 6 months, followed by a booster at 12 months.

Hib-schedule B

A primary course of two Hib doses due at 2 and 4 months, followed by a booster at 12 months.

Immunisation

The process of inducing immunity to a disease, caused by an infectious agent, through the administration of a vaccine.

Immunisation status

The result of immunisation information for a particular child being forwarded to, and processed by, the ACIR. Determination of immunisation status is undertaken at the disease level in a process that calculates the specific diseases each child is required to be vaccinated against.

Individual age-based schedule

The standard ages given for immunisation according to the ASVS and the NIP Schedule.

Routine schedule

The vaccines provided under the NIP Schedule.

Rejected dose

A dose that is not administered according to the National Due and Overdue Rules.

Valid dose

A dose that is administered according to the National Due and Overdue Rules.

Overview

The Australian Childhood Immunisation Register

From 1 January 1996, the Australian Childhood Immunisation Register (the ACIR) began recording details of vaccinations given to children under the age of seven years who live in Australia.

The ACIR is the national immunisation database administered by Medicare Australia. The ACIR provides a facility to assist health professionals increase childhood immunisation rates. It also provides useful information to parents about the immunisation details recorded for their child or children.

The ACIR reports immunisation coverage at national, state and local levels (including individual service provider), identifying areas with low immunisation to assist health planning programs.

The National Immunisation Program

The National Immunisation Program (NIP) is an Australian, State and Territory Governments initiative. It provides free vaccine to the Australian community to protect against major vaccine preventable diseases.

The NIP Schedule describes which diseases are vaccinated against at which ages. The ACIR aligns with the NIP Schedule; children are assessed as due or overdue for immunisation according to the vaccines provided under the NIP.

A copy of the current NIP Schedule is shown on page 5.

The Australian Immunisation Handbook

The National Health and Medical Research Council's (NHMRC) Australian Immunisation Handbook (the Handbook) provides detailed information for immunisation providers on available vaccine choices and the administration of vaccines.

The Australian Standard Vaccination Schedule (ASVS) contained in the Handbook stands separately from the NIP Schedule.

The National Due and Overdue Rules for Childhood Immunisation

The ACIR's National Due and Overdue Rules for Childhood Immunisation are derived from the Handbook and are made available to help providers better understand the operations of the ACIR. Clinicians should always use the Handbook to guide decision making about immunisations.

Consideration of vaccine by antigen component

The National Due and Overdue Rules for Childhood Immunisation are used by the ACIR to determine the immunisation status for a child. The immunisation status is the result of immunisation information forwarded to, and processed by, the ACIR. When the ACIR receives notification of a vaccination, the vaccine brand name or vaccine description is used to identify the antigen component/s of the vaccine.

Determination of a child's immunisation status is undertaken at the antigen level in a process that calculates the specific diseases each child is required to be vaccinated against, as determined by the NIP Schedule. This process identifies the child's applicable vaccination schedule according to their date of birth, valid vaccinations recorded, and the presence of any records of medical contraindication or natural immunity.

The due and overdue concept

Each applicable antigen component of an individual age-based schedule is identified. A child's immunisation status is assessed using the detailed rules against each antigen required for an age-based schedule. On the basis of immunisation information forwarded to the ACIR, an assessment is made to determine at a given time if a child is due, not due or overdue for immunisation.

For example, a child is 3 months of age and the ACIR has received information that dose 1 of diphtheria, tetanus, pertussis, polio, pneumococcal, Hib and hepatitis B was given at 2 months of age. For the 2 month age schedule, this child is assessed as 'not due' for immunisation. For the 4 month age schedule, this child is identified as being 'due' for immunisation 2 months after the date of dose 1, and overdue 3 months after the date of dose 1.

General outline of the rules

- A dose is never due or overdue when a later dose has been given. For example, dose 1 can never be due or overdue if dose 2 has been given.
- Certain rules are applied when giving primary, booster or catch up vaccinations; these are described in the Handbook. The National Due and Overdue Rules include an administrative interpretation of some clinical rules derived from the Handbook. For example, to determine the immunisation status on the ACIR, certain vaccines or components of vaccines are considered to be equivalent in these rules. When they are not considered equivalent, individual schedules apply, such as for Hib and Rotavirus.

- With the exceptions noted in the following paragraph, for the purpose of these rules, all components of vaccines against the same disease are considered equivalent regardless of the source of the vaccine. For example, the diphtheria, tetanus or pertussis components may be contained within 'Infanrix' or 'Tripacel' (brands of diphtheria, tetanus and acellular pertussis vaccine).
- Different Hib vaccines require different pathways; the pathway followed depends on which Hib vaccine is used. Similarly, different Rotavirus vaccines require different pathways. For clinical reasons, the Handbook recommends that the Hib or Rotavirus course is completed with the same vaccine with which it was commenced. However there will be occasions when interchanging between pathways occurs (see the general notes and detailed rules for each antigen for more information).
- While different hepatitis B vaccines follow different product schedules, the due and overdue rule requirements for hepatitis B are the same.
- In general, extra doses are not accepted by the ACIR. For example a notification of dose 4 of hepatitis B would be rejected. The exception occurs when a combination vaccine is used to bring the child up to date with one of its components (even though the child has reached the maximum count for one or more of the remaining components). For example, a child may have had a hepatitis B vaccine to bring the hepatitis B dose count to 3. A later notification of administration of Infanrix-HepB would be accepted, even though the hepatitis B count is now 4, and higher than the number of doses required. Note that this is an administrative convenience and does not imply that such an action is clinically appropriate.

Timing issues

- There must be an interval of at least 27 days between successive doses of the same antigen vaccination, for example, between dose 1 and dose 2 of a vaccine containing diphtheria. In some cases (see detailed rules for each antigen) this interval is required to be longer, or there is a minimum age at which a particular dose can be given.
- With the exception of the hepatitis B vaccine, no vaccine on the NIP Schedule may be given before the child reaches 1 month of age.
- For a birth dose of hepatitis B vaccine to be considered valid, it must be given between birth and 7 days of age.
- The minimum age requirement for the first dose of the combination measles, mumps, rubella vaccine is 6 months. While a child would not usually commence immunisation against measles before 12 months of age, this requirement is in place to cater for special circumstances as described in the Handbook.

National Immunisation Program Schedule, Australia

(Valid from 1 July 2007)

Age	Vaccine
Birth	Hepatitis B
2 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b Hepatitis B Inactivated poliomyelitis Pneumococcal conjugate ^{1.} Rotavirus ^{2a.}
4 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b Hepatitis B Inactivated poliomyelitis Pneumococcal conjugate Rotavirus
6 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b ^{3.} Hepatitis B – or at 12 months Inactivated poliomyelitis Pneumococcal conjugate Rotavirus ^{2b.}
12 months	Measles, mumps and rubella Hepatitis B – or at 6 months <i>Haemophilus influenzae</i> type b Meningococcal C conjugate ^{4.}
18 months	Varicella ^{5.}
4 years	Diphtheria, tetanus and acellular pertussis Inactivated poliomyelitis Measles, mumps and rubella

1. Applies to children born from 1 January 2005.
- 2a. Applies to children born from 1 May 2007.
- 2b. 3 doses of Rotavirus vaccine (at 2, 4 and 6 months) are required if using RotaTeq vaccine.
3. Four doses of Hib vaccine (at 2, 4, 6 and 12 months) are required if using PRP-T Hib containing vaccines.
4. Applies to children born from 1 January 2002.
5. Applies to children born from 1 May 2004.

Vaccines included in the NIP Schedule

Vaccine brand name	Disease components	Product schedule
Infanrix Hexa	Diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis, Hib	2,4 & 6m (Hib pathway A)
Infanrix Penta	Diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis	2,4 & 6m
Pediacel	Diphtheria, tetanus, pertussis, poliomyelitis, Hib	2,4 & 6m (Hib pathway A)
Poliacel	Diphtheria, tetanus, pertussis, poliomyelitis, Hib	2,4 & 6m (Hib pathway A)
Infanrix-IPV	Diphtheria, tetanus, pertussis, poliomyelitis	2,4,6m & 4y
Quadracel	Diphtheria, tetanus, pertussis, poliomyelitis	2,4,6m & 4y
Infanrix-HepB	Diphtheria, tetanus, pertussis, hepatitis B	2,4,6m & 4y
Tripacel	Diphtheria, tetanus, pertussis	2,4,6m & 4y
Infanrix	Diphtheria, tetanus, pertussis	2,4,6m & 4y
ActHib	Hib	2,4,6,12m (Hib pathway A)
HibTITER	Hib	2,4,6,12m (Hib pathway A)
Hiberix	Hib	2,4,6,12m (Hib pathway A)
Comvax	Hib, hepatitis B	2,4,12m (Hib pathway B)
PedvaxHIB	Hib	2,4,12m (Hib pathway B)
Engerix B	Hepatitis B	Birth dose
HBVAX II	Hepatitis B	Birth dose
IPOL	Poliomyelitis (IPV)	2,4,6m & 4y
Polio Sabin	Poliomyelitis (OPV)	2,4,6m & 4y
MMRII	Measles, mumps, rubella	12m & 4y
Priorix	Measles, mumps, rubella	12m & 4y
Meningitec	Meningococcal C (conjugate)	12m
Menjugate	Meningococcal C (conjugate)	12m
NeisVac-C	Meningococcal C (conjugate)	12m
Prevenar	Invasive pneumococcal disease (conjugate)	2,4, 6m
Pneumovax23	Invasive pneumococcal disease (polysaccharide)	18m onwards
Varilrix	Varicella Zoster (Chickenpox)	18m
Varivax	Varicella Zoster (Chickenpox)	18m
Rotarix	Rotavirus	2 & 4m (Rotavirus pathway A)
RotaTeq	Rotavirus	2,4 & 6m (Rotavirus pathway B)

Diphtheria—detailed rules

Dose 1

Provided that dose 1, 2, 3 or 4 of a diphtheria vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Where dose 2, 3 or 4 of a diphtheria vaccine has not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Dose 3

Where dose 3 or 4 of a diphtheria vaccine has not been given, dose 3 is due 2 months after the date of dose 2 and is overdue 3 months after the date of dose 2.

Dose 4

Provided that dose 4 of a diphtheria vaccine has not been given and the date of dose 3 is before the child attains 3 years and 6 months of age, dose 4 is due when the child attains 4 years of age and is overdue at 5 years of age.

Provided that dose 4 of a diphtheria vaccine has not been given and the date of dose 3 is after the child attains 3 years and 6 months of age, dose 4 is due 6 months after the date of dose 3 and overdue when the child attains 5 years of age or 7 months after the date of dose 3, whichever is the later.

An interval of at least 6 months must occur between giving dose 3 and dose 4.

***Haemophilus influenzae* type B (Hib)—general notes**

Hib pathway A is a primary course of three doses due at 2, 4 and 6 months, followed by a booster at 12 months. Examples of current vaccine brands that follow pathway A are Infanrix Hexa, Pediacel, Poliacel, Hiberix, HibTITER and ActHIB.

Hib pathway B is a primary course of two doses due at 2 and 4 months, followed by a booster at 12 months. Examples of current vaccine brands that follow pathway B are PedvaxHIB and Comvax.

Hib primary vaccination

For primary vaccination, if the child receives **any** dose of a Hib pathway A vaccine, then the 3-dose course for pathway A must be followed rather than the 2-dose course for pathway B (although vaccines from either the Hib pathway A or Hib pathway B series are interchangeable and either may be used).

Hib booster

For booster doses and in children over 15 months of age, regardless of previous Hib vaccinations, a single dose of any registered Hib vaccine is sufficient for protection.

No Hib vaccine is due or overdue after the child attains 5 years of age.

***Haemophilus influenzae* type B (Hib)—detailed rules**

Hib pathway A

—primary course at 2, 4 and 6 months followed by a booster at 12 months

Dose 1

Provided that dose 1, 2, 3 or 4 of a Hib vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Provided that dose 2, 3 or 4 of a Hib vaccine has not been given, dose 2 is due 2 months after the date of dose 1, and is overdue 3 months after the date of dose 1.

If the date of dose 1 is after the child attains 15 months of age, no further doses are required.

Dose 3

Provided that doses 3 or 4 of a Hib vaccine have not been given, dose 3 is due 2 months after the date of dose 2, and is overdue 3 months after the date of dose 2.

If the date of dose 1 is after the child attains 12 months of age, dose 3 is not required.

If the date of dose 2 is after the child attains 15 months of age, no further doses are required.

Dose 4

Provided that dose 4 of a Hib vaccine has not been given then dose 4 is due at 12 months of age and overdue at 13 months of age.

If the date of dose 1 is after the child attains 7 months of age, dose 4 is not required.

If the date of dose 3 is after the child attains 15 months of age, dose 4 is not required.

An interval of at least 2 months must occur between doses 3 and 4.

Dose 4 must not be given before the child attains 11 months of age.

***Haemophilus influenzae* type B (Hib)—detailed rules**

Hib pathway B

—primary course at 2 and 4 months followed by a booster at 12 months

Dose 1

Provided that dose 1, 2 or 3 of a Hib vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Provided that doses 2 or 3 of a Hib vaccine have not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

If the date of dose 1 is after the child attains 15 months of age, no further doses are required.

Dose 3

Provided that dose 3 of a Hib vaccine has not been given, dose 3 is due at 12 months of age or 2 months after the date of dose 2, whichever is the later, and is overdue at 13 months of age or 3 months after the date of dose 2, whichever is the later.

If the date of dose 1 is after the child attains 12 months of age, dose 3 is not required.

If the date of dose 2 is after the child attains 15 months of age, dose 3 is not required.

An interval of at least 2 months must occur between doses 2 and 3.

Dose 3 must not be given before the child attains 11 months of age.

Hepatitis B—general notes

Hepatitis B is not due or overdue after the child has received three valid doses. Three doses of a hepatitis B vaccine, which excludes a birth dose, are sufficient to deem a child 'immunised for' hepatitis B.

The standard schedule for hepatitis B vaccine, with or without a birth dose, is:

- Dose 1: due at 2 months of age and overdue at 3 months
- Dose 2: due at 4 months of age and overdue at 5 months
- Dose 3: due at 6 months of age and overdue at 13 months

Note the timing between the due and overdue requirements for dose 3. This is to cater for different hepatitis B vaccine products that follow different product schedules. For the purpose of these rules, hepatitis B vaccine products are interchangeable.

Hepatitis B—birth dose rules

A dose of hepatitis B vaccine given between birth and 7 days of age is considered to be the birth dose.

A dose of hepatitis B vaccine reported as the birth dose, given between 8 days and one month of age, will be recorded dose 1 given early.

Hepatitis B—detailed rules

Dose 1

Provided that doses 1, 2 or 3 of a hepatitis B vaccine have not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Provided that doses 2 or 3 of a hepatitis B vaccine have not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Dose 3

Provided that dose 3 of a hepatitis B vaccine has not been given, dose 3 is due at 6 months of age or 2 months after the date of dose 2, whichever is the later, and is overdue at 13 months of age or 3 months after the date of dose 2, whichever is the later.

Measles—detailed rules

A dose prior to 12 months of age is given only in special circumstances as described in the Handbook.

Dose 1

Provided that dose 1, 2 or 3 of a measles vaccine has not been given, dose 1 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Dose 2

Provided that doses 2 or 3 of a measles vaccine has not been given:

- If the date of dose 1 is before the child attains 11 months of age then dose 2 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.
- If the date of dose 1 is after the child attains 11 months of age then dose 2 is due when the child attains 4 years of age or 1 month after the date of dose 1, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 1, whichever is later.

Dose 3

Provided that dose 3 of a measles vaccine has not been given:

- If the date of dose 1 is after the child attains 11 months of age then dose 3 is not required.
- If the date of dose 1 is before the child attains 11 months of age then dose 3 is due when the child attains 4 years of age or 1 month after the date of dose 2, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 2, whichever is later.

Meningococcal C—detailed rules

For children born from 1 January 2002:

No dose of meningococcal C is valid before the child attains 6 weeks of age.

Dose 1

Provided that dose 1, 2 or 3 of a conjugate meningococcal C vaccine has not been given, dose 1 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Dose 2

If the date of dose 1 is after the child attains 11 months of age then dose 2 is not required.

Provided that dose 2 or 3 of a conjugate meningococcal C vaccine has not been given, if the date of dose 1 is before the child attains 4 months of age, then dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Provided that dose 2 or 3 of a conjugate meningococcal C vaccine has not been given, if the date of dose 1 is after the child attains 4 months of age, then dose 2 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Dose 3

If the date of dose 1 is after the child attains 4 months of age then dose 3 is not required.

If the date of dose 2 is after the child attains 11 months of age then dose 3 is not required.

Provided that dose 3 of a conjugate meningococcal C vaccine has not been given, if the date of dose 1 is before the child attains 4 months of age, then dose 3 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Mumps—detailed rules

Dose 1

Provided that dose 1, 2 or 3 of a mumps vaccine has not been given, dose 1 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Dose 2

Provided that doses 2 or 3 of a mumps vaccine have not been given:

- If the date of dose 1 is before the child attains 11 months of age then dose 2 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.
- If the date of dose 1 is after the child attains 11 months of age then dose 2 is due when the child attains 4 years of age or 1 month after the date of dose 1, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 1, whichever is later.

Dose 3

Provided that dose 3 of a mumps vaccine has not been given:

- If the date of dose 1 is after the child attains 11 months of age then dose 3 is not required.
- If the date of dose 1 is before the child attains 11 months of age then dose 3 is due when the child attains 4 years of age or 1 month after the date of dose 2, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 2, whichever is later.

Pertussis—detailed rules

Dose 1

Provided that dose 1, 2, 3 or 4 of a pertussis vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Where dose 2, 3 or 4 of a pertussis vaccine has not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Dose 3

Where dose 3 or 4 of a pertussis vaccine has not been given, dose 3 is due 2 months after the date of dose 2 and is overdue 3 months after the date of dose 2.

Dose 4

Provided that dose 4 of a pertussis vaccine has not been given and the date of dose 3 is before the child attains 3 years and 6 months of age, dose 4 is due when the child attains 4 years of age and is overdue at 5 years of age.

Provided that dose 4 of a pertussis vaccine has not been given and the date of dose 3 is after the child attains 3 years and 6 months of age, dose 4 is due 6 months after the date of dose 3 and overdue when the child attains 5 years of age or 7 months after the date of dose 3, whichever is the later.

An interval of at least 6 months must occur between giving dose 3 and dose 4.

Pneumococcal (7vPCV schedule)—detailed rules

For children born from 1 January 2005:

Dose 1

Provided that dose 1, 2 or 3 of conjugate pneumococcal vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Where dose 2 or 3 of conjugate pneumococcal vaccine has not been given, dose 2 is due 2 months after the date of dose 1 and overdue 3 months after the date of dose 1.

If the date of dose 1 is after the child attains 17 months of age, no further doses are required.

Dose 3

Where dose 3 of conjugate pneumococcal vaccine has not been given, dose 3 is due 2 months after the date of dose 2 and overdue 3 months after the date of dose 2.

If the date of dose 1 is after the child attains the 7 months of age, dose 3 is not required.

If the date of dose 2 is after the child attains 17 months of age, dose 3 is not required.

No conjugate pneumococcal vaccine is due or overdue after the child attains 2 years of age.

Poliomyelitis—detailed rules

Dose 1

Provided that dose 1, 2, 3 or 4 of a poliomyelitis vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Provided that dose 2, 3 or 4 of a poliomyelitis vaccine has not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Dose 3

Provided that doses 3 or 4 of a poliomyelitis vaccine have not been given, dose 3 is due 2 months after the date of dose 2 and is overdue 3 months after the date of dose 2.

Dose 4

Provided that dose 4 of a poliomyelitis vaccine has not been given and the date of dose 3 is before the child attains 3 years of age, dose 4 is due when the child attains 4 years of age and overdue when the child attains 5 years of age.

Provided that dose 4 of a poliomyelitis vaccine has not been given and the date of dose 3 is between 3 and 4 years of age, dose 4 is due 12 months after the date of dose 3 and overdue when the child attains 5 years of age or 13 months after the date of dose 3, whichever is the later.

If the date of dose 3 is after the child attains 4 years of age, dose 4 is not required.

Rotavirus—general notes

No dose of a Rotavirus vaccine is valid if given before the child attains 6 weeks of age.

There must be a minimum of 28 days between successive doses.

Rotavirus pathway A is a course of 2 doses of **Rotarix** due at 2 and 4 months. Where pathway A is followed, no dose of Rotarix is due or overdue after the child attains 24 weeks of age.

Rotavirus pathway B is a course of 3 doses of **RotaTeq** due at 2, 4 and 6 months. Where pathway B is followed, no dose of RotaTeq is due or overdue after the child attains 32 weeks of age.

Interchangeability of vaccines

Completion of a vaccination course should be with a rotavirus vaccine from the same manufacturer where possible. There are no studies that address the interchangeability of the 2 available rotavirus vaccines. However, if either dose 1 or 2 of rotavirus vaccine is given as RotaTeq, a third dose of rotavirus vaccine should be given, provided that the upper age limit and inter-vaccine interval (as defined above) are met.

Rotavirus—detailed rules

For children born from 1 May 2007:

Rotavirus pathway A—Rotarix

Dose 1

Provided that dose 1 or 2 of Rotarix vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

If the date of dose 1 is after the child attains 20 weeks of age, dose 2 is not required.

Provided that dose 2 of Rotarix vaccine has not been given, dose 2 is due 2 months after the date of dose 1, and is overdue 3 months after the date of dose 1.

Rotavirus pathway B—RotaTeq

Dose 1

Provided that dose 1, 2 or 3 of RotaTeq vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

If the date of dose 1 is after the child attains 28 weeks of age, no further doses are required.

Provided that dose 2 or 3 of RotaTeq vaccine has not been given, dose 2 is due 2 months after the date of dose 1, and is overdue 3 months after the date of dose 1.

Dose 3

If the date of dose 1 is after the child attains 24 weeks of age, dose 3 is not required.

If the date of dose 2 is after the child attains 28 weeks of age, dose 3 is not required.

Provided that dose 3 of RotaTeq vaccine has not been given dose 3 is due 2 months after the date of dose 2, and is overdue 3 months after the date of dose 2.

Rubella—detailed rules

Dose 1

Provided that dose 1, 2 or 3 of a rubella vaccine has not been given, dose 1 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.

Dose 2

Provided that doses 2 or 3 of a rubella vaccine have not been given:

- If the date of dose 1 is before the child attains 11 months of age then dose 2 is due when the child attains 12 months of age and overdue when the child attains 13 months of age.
- If the date of dose 1 is after the child attains 11 months of age then dose 2 is due when the child attains 4 years of age or 1 month after the date of dose 1, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 1, whichever is later.

Dose 3

Provided that dose 3 of a rubella vaccine has not been given:

- If the date of dose 1 is after the child attains 11 months of age then dose 3 is not required.
- If the date of dose 1 is before the child attains 11 months of age then dose 3 is due when the child attains 4 years of age or 1 month after the date of dose 2, whichever is later, and overdue when the child attains 5 years of age or 2 months after the date of dose 2, whichever is later.

Tetanus—detailed rules

Dose 1

Provided that dose 1, 2, 3 or 4 of a tetanus vaccine has not been given, dose 1 is due when the child attains 2 months of age and overdue when the child attains 3 months of age.

Dose 2

Where dose 2, 3 or 4 of a tetanus vaccine has not been given, dose 2 is due 2 months after the date of dose 1 and is overdue 3 months after the date of dose 1.

Dose 3

Where dose 3 or 4 of a tetanus vaccine has not been given, dose 3 is due 2 months after the date of dose 2 and is overdue 3 months after the date of dose 2.

Dose 4

Provided that dose 4 of a tetanus vaccine has not been given and the date of dose 3 is before the child attains 3 years and 6 months of age, dose 4 is due when the child attains 4 years of age and is overdue at 5 years of age.

Provided that dose 4 of a tetanus vaccine has not been given and the date of dose 3 is after the child attains 3 years and 6 months of age, dose 4 is due 6 months after the date of dose 3 and overdue when the child attains 5 years of age or 7 months after the date of dose 3, whichever is the later.

An interval of at least 6 months must occur between giving dose 3 and dose 4.

Varicella—detailed rules

For children born from 1 May 2004:

Dose 1

Provided that a dose of varicella vaccine has not been given, dose one is due when the child attains 18 months of age and overdue when the child attains 19 months of age.