

Figure 1.3.1: Catch-up Worksheet for children <8 years of age

CATCH-UP WORKSHEET					
Name:	Last dose given	Number of doses required at current age*	Dose number due now	Further doses	Comments
DOB:	<i>Dose number and date</i>			<i>Interval or date</i>	
Age:					
DTPa					
Poliomyelitis (IPV)					
Hepatitis A					
Hepatitis B					
Hib					
7vPCV & 23vPPV					
MenCCV					
MMR					
Rotavirus					DO NOT give after upper age limits for each dose. See Table 3.18.1.
Varicella					
CATCH-UP APPOINTMENTS					
Date	Vaccines & Dose number	Interval to next dose		Comments	

* See step 5 'Using the Catch-up Worksheet' above.

Table 1.3.5: Number of vaccine doses that should have been administered by the current age of the child (table to be used in conjunction with Catch-up Worksheet)

VACCINE	CURRENT AGE						
	0–<2mo	2–<4mo	4–<6mo	6–<12mo	12–18mo	>18mo–<4yr	4yr–<8yr
DTPa*		1	2	3	3	3	4
Poliomyelitis (IPV)		1	2	3	3	3	4 [†]
Hepatitis A [‡]					1 [‡]	2 [‡]	2 [‡]
Hepatitis B	birth dose given [§]	2	3	4	4	4	4
	birth dose not given	1	2	3 [^]	3	3	3
Hib	Complex – see Table 1.3.8 for Hib vaccine catch-up						
7vPCV & 23vPPV	Complex – see Tables 1.3.9, 1.3.10 and 1.3.11 for pneumococcal vaccine catch-up						
MenCCV					1	1	1
MMR					1	2	2
Rotavirus [#]	There are specific age limits as per Chapter 3.18, <i>Rotavirus</i> , Table 3.18.1.			NO CATCH-UP			
Varicella						1	1

* Some children may have received 4 doses of DTP by 18 months of age, especially if moved from overseas. These children will require a 5th dose of DTPa at 4 years of age.

† If the 3rd dose of IPV is given after 4 years of age, a 4th dose is not required. However, if using a combination vaccine it is acceptable to receive a 4th dose.

‡ Indigenous children resident in NT, QLD, SA and WA only. Dependent on jurisdiction, the 1st dose is given at 12–18 months of age followed by the 2nd dose 6 months later at 18–24 months of age. Consult relevant State/Territory authorities for advice regarding catch-up in children older than 2 years of age.

§ Birth dose should be given within 7 days of birth. Although a birth dose of hepatitis B vaccine is recommended for all infants, a catch-up dose is not necessary if it was not given. Even if the birth dose was given, a further 3 doses of hepatitis B vaccine are required.

^ Some States/Territories schedule a 3rd dose (or the 4th dose) of hepatitis B vaccine at 6 months of age rather than 12 months.

There is *no catch-up* for rotavirus vaccine (see Chapter 3.18, *Rotavirus*).

Table 1.3.6: Minimum dose intervals for NIP vaccines for children <8 years of age (table to be used in conjunction with Catch-up Worksheet)

Vaccine	Minimum interval between dose 1 & 2	Minimum interval between dose 2 & 3	Minimum interval between dose 3 & 4
DTPa*	4 weeks	4 weeks	6 months
Poliomyelitis (IPV)	4 weeks	4 weeks	4 weeks [†]
Hepatitis A (Indigenous children in NT, QLD, SA & WA only)	6 months		
Hepatitis B			
If first dose given at birth or at ≤7 days after birth [‡]	4 weeks	8 weeks	8 weeks
If first dose is not given at birth or at >7 days after birth [§]	4 weeks	8 weeks	
Hib (PRP-OMP)	See Table 1.3.8 Hib vaccine catch-up		
Hib (PRP-T)			
Pneumococcal (7vPCV)	See Tables 1.3.9, 1.3.10, 1.3.11 Pneumococcal vaccine catch-up		
MenCCV [^]			
MMR [#]	4 weeks		
Rotavirus**	Rotarix	4 weeks	
	RotaTeq	4 weeks	4 weeks
Varicella	4 weeks		

* If DTPa is only available in combination with other antigens (eg. DTPa-IPV, DTPa-hepB-IPV-Hib or DTPa-HepB-IPV), these formulations can be used where necessary for primary course or catch-up doses in children <8 years of age.

† If the 3rd dose of IPV is given after 4 years of age, a 4th dose is not required. However, if using a combination vaccine, it is acceptable to receive a 4th dose.

‡ If dose given at birth or within 7 days of birth (considered dose 1 for this table), then 3 subsequent doses should be given.

§ If dose 1 is not given at birth or within 7 days of birth, then it should be given at 2 months of age, followed by a further 2 doses.

[^] The schedule is a single dose given at 12 months of age. Alternative schedules are available for children <12 months of age (see Chapter 3.12, *Meningococcal disease*).

[#] MMR vaccine may be given from 9 months of age if in contact with case, but dose *must* be repeated at 12 months of age.

** Consult Chapter 3.18, *Rotavirus*, Table 3.18.1 for upper age limits for administration of rotavirus vaccines. Catch-up is *not* recommended.

Table 1.3.7: Minimum age for the first dose of vaccine in exceptional circumstances*

Vaccine	Minimum age for first dose in exceptional circumstances	Minimum age accepted as valid by ACIR
DTPa	6 weeks	6 weeks
Poliomyelitis (IPV)	6 weeks	6 weeks
Hepatitis A (Indigenous children in NT, QLD, SA & WA only)	12 months	12 months
Hepatitis B	6 weeks	6 weeks
Hib (PRP-OMP)	6 weeks	6 weeks
Hib (PRP-T)	6 weeks	6 weeks
MenCCV	6 weeks [†]	12 months
MMR	9 months [‡]	11 months
Pneumococcal (7vPCV)	6 weeks	6 weeks
Rotavirus	6 weeks	not stated
Varicella	9 months [§] (Varilrix) 12 months [^] (Varivax)	not stated

* Exceptional circumstances may include infants/children being vaccinated before overseas travel, or opportunistic vaccination following early attendance to a provider. These ages may differ from routinely recommended ages of administration under the NIP.

† If 2 doses of MenCCV are given before 12 months of age, then a booster dose should be given at 12 months of age (see Chapter 3.12, *Meningococcal disease*).

‡ MMR vaccine may be given from 9 months of age if in contact with case, but dose *must* be repeated at 12 months of age.

§ If a child receives varicella vaccine at <12 months of age, a further dose should be given at 18 months of age.

^ Receipt of at least 1 dose of varicella vaccine is recommended from 12 months of age.