

# Victorian Immunisation Schedule – March 2008

AGE	VACCINE		DISEASE	Site & Route
Birth	H-B-Vax II-Paed		Hepatitis B (Not given after 7 days)	Ant/lat. thigh IM
<b>Rotavirus</b> If child >13wks. NO doses given	<b>Infanrix-hexa</b> <b>Prevenar</b> <b>RotaTeq</b> Dose 1, ≤ 12wks	1	Diphtheria, Tetanus, Pertussis, Polio, Hepatitis B Haemophilus type B (Hib)	R) ant/lat. Thigh IM
		1	Pneumococcal	L) ant/lat. Thigh IM
		1	Rotavirus	Oral
<b>12 mths. booster dose of PREVENAR for 'at risk' group: (incl. &lt;28wks gestation)</b> If gestation period <32wks. or <2000g give H-B-Vax II Paed.	<b>Infanrix-hexa</b> <b>Prevenar</b> <b>RotaTeq</b> Dose 2, 10 - ≤ 32wks	2	Diphtheria, Tetanus, Pertussis, Polio, Hepatitis B, Haemophilus type B (Hib)	R) ant/lat. Thigh IM
		2	Pneumococcal	L) ant/lat. Thigh IM
		2	Rotavirus	Oral
<b>12 months</b>	<b>Infanrix-hexa</b> <b>Prevenar</b> <b>RotaTeq</b> Dose 3, 14 - ≤ 32wks	3	Diphtheria, Tetanus, Pertussis, Polio, hepatitis B, haemophilus type B (Hib)	R) ant/lat. Thigh IM
		3	Pneumococcal	L) ant/lat. Thigh IM
		3	Rotavirus	Oral
<b>18 Months</b> Born since May 1 <sup>st</sup> 2004	<b>Priorix</b> <b>NeisVac-C</b> <b>Hiberix</b>	1	Measles, Mumps, Rubella	L) Deltoid IM
		1	Meningococcal C:	R) Deltoid IM
		4	Haemophilus type B (Hib)	R) ant/lat. Thigh IM
		<b>Note:</b> Children who have completed 2, 4 & 6 month immunisations with <b>Infanrix-IPV &amp; Comvax</b> to have: <b>Comvax</b> instead of Hiberix, (if Comvax unavailable, vaccinate with <b>Hiberix &amp; H-B-Vax II Paediatric</b> ) Give in opposite ant/lat. thighs.		
<b>4-5 years booster dose of PNEUMOVAX 23 for 'at risk' group</b>	<b>Varilrix</b>	1	Chickenpox: <b>Not necessary if history of disease</b>	Either deltoid S/C
		<b>4 years</b>	<b>Infanrix-IPV</b> <b>Priorix</b>	4 2
<b>Gardasil</b> 2008: Yr. 7, 9 & 10 2009: Yr. 7 ongoing	<b>Year 7 School</b> HepB 0, 4-6 mths 11-15yrs. Gardasil 0, 2, 6 mths	1	Chickenpox: <b>Not necessary if history of disease or vaccination.</b>	R) Deltoid S/C
		1	Hepatitis B: <b>Not necessary if previous primary course given.</b>	L) Deltoid IM R) if only 2 vaccines given, otherwise separate by 2.5 cm.
		1	Human Papillomavirus:	L) Deltoid IM
		2	Human Papillomavirus:	L) Deltoid IM
<b>Year 10 School</b> 15-17yrs	<b>H-B-Vax II Adult</b> <b>Gardasil</b>	2	Hepatitis B:	R) Deltoid IM
		3	Human Papillomavirus:	L) Deltoid IM
		5	Diphtheria, Tetanus, Pertussis:	Either deltoid IM
<b>Women</b> 18 – 26 yrs. Till June 2009	<b>Gardasil</b>	1	Human Papillomavirus: <b>(0, 2, 6 months)</b>	Either deltoid IM
		2		
3				
<b>Non-immune women</b>	<b>Priorix</b>		Measles, Mumps, Rubella: <b>Planning pregnancy or shortly after delivery</b>	Either deltoid IM
<b>50 Years</b>	<b>ADT Booster</b>		Diphtheria, Tetanus	Either deltoid IM
<b>15-49 yrs.</b> Revaccinate 5yrs. later, then at 50yrs. or 5yrs. after revaccination, whichever is later.	<b>Over 50 Years</b> Koori & Torres St. Is.		Influenza (Yearly vaccination)	Opposite deltoids IM
			Pneumococcal (Dose 2 in 5yrs)	
<b>Over 65 Years</b>	<b>Influenza</b> <b>Pneumococcal</b>		Influenza (Yearly vaccination)	Opposite deltoids IM
			Pneumococcal (Dose 2 in 5yrs)	

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