

Vaccines for Children Oregon State-Supplied Vaccine Effective January 15, 2010

Vaccines	Ages of Covered Children	All or High Risk?
DTaP	6 weeks through 6 years	All
Hepatitis A	1 year through 18 years	All
Hepatitis B	Birth through 18 years	All
Hib ₁	6 weeks through 59 months, certain 5-18 year olds	See footnote
HPV – Gardasil® & Cervarix®	Females: 9 years through 18 years, either brand Males: 9 years through 18 years, Gardasil® only	All
Influenza (2009-10 Season)	6 months through 18 years	All
IPV	6 weeks through 18 years	All
Meningococcal Vaccines (Both Polysaccharide and Conjugate), MPSV4 & MCV4 ₂	2 years through 18 years, as indicated	See footnotes
MMR	1 year through 18 years	All
MMR/V	1 year through 12 years	All
Pneumococcal Conjugate (PCV7/PCV13)	6 weeks through 59 months	All
Pneumococcal Polysaccharide 23-valent (PPV23) ₃	2 through 18 years, high risk	See footnotes
Rotavirus	6 weeks through 32 weeks	All
Td	7 years through 18 years	All
Tdap	10 years through 18 years	All
Varicella	1 year through 18 years	All

- 1) One dose of Hib vaccine is available for unimmunized high-risk children ages 5 through 18 years, with either functional or anatomical asplenia (SSD, post-splenectomy); immunodeficiency; HIV infection; or immunosuppression due to HIV infection or chemotherapy.
- 2) MCV4 & MPSV4: MCV4 is the preferred vaccine, whenever possible. Routine vaccination of all persons aged 11--18 years with 1 dose of MCV4 at the earliest opportunity. Persons aged 11--12 years should be routinely vaccinated at the 11--12 years health-care visit as recommended by ACIP. MCV4 is also available for children ages 2 through 10 years at high risk, including: persons with terminal complement component deficiencies; persons with anatomic or functional asplenia; travelers to or residents of Sub-Saharan Africa's "Meningitis Belt," during December to June; visitors to Mecca in Saudi Arabia during annual Hajj; countries in which *N. Meningitidis* is hyperendemic or epidemic; also recommended for use in control of meningococcal outbreaks. MPSV4 is available as above when MCV4 is not available or contraindicated.
- 3) Pneumococcal Polysaccharide (23-valent) vaccine is available for high-risk children 2 years through 18 years as follows:

IMMUNOCOMPETENT PERSONS	HIGH RISK PERSONS
<p>Persons aged 2 years through 18 years with chronic illness, including</p> <ul style="list-style-type: none"> • Cardiovascular disease • Pulmonary disease (e.g. COPD, emphysema. The recommendation does <u>not include</u> ASTHMA in children/adolescents) • Cochlear implants • Diabetes mellitus • Alcoholism, chronic liver disease • CSF leaks 	<p>Persons ≥ 2 years of age immunocompromised due to:</p> <ul style="list-style-type: none"> ★ HIV infection ★ Hodgkins disease, multiple myeloma, lymphoma, generalized malignancy, leukemia ★ Chronic renal failure or nephrotic syndrome ★ Organ or bone marrow transplants ★ Immunosuppression ★ functional or anatomic asplenia (sickle cell disease or splenectomy) ★ High dose corticosteroid therapy (14 days or longer) <p>A second dose of PSV23 is recommended 5 years after the first dose of PPSV23 for persons aged ≥2 years who are immunocompromised, have sickle cell disease, or functional or anatomic asplenia. ACIP Provisional Recommendations for the Use of Pneumococcal Vaccines. December 8, 2008, #4.</p> <p>Available from http://www.cdc.gov/vaccines/recs/provisional/downloads/pneumo-oct-2008-508.pdf</p>
<p>Persons aged 2–18 years living in nursing homes and other long-term care facilities</p>	

If you have any questions about this chart or the footnotes, or would like the document in an alternate format (e.g. Braille), please call the Public Health Division Immunization Program at (971) 673-0300.