

BEFORE IMMUNISING

- Always review the <u>Australian Immunisation Register (AIR)</u> to check the patient's previous immunisation history.
- Check the online Australian Immunisation Handbook or download the Handbook app for information about catch-up immunisation, timing of immunisation for specific risk groups at https://immunisationhandbook.health.gov.au
- Record the correct details of all immunisations on the AIR as soon as possible after they have been administered (this is a mandatory requirement).

Key: Aboriginal and Torres Strait Islander, Medical Risk, R Reconstitute, SC Subcutaneous, IM Intramuscular, DL Deltoid, AL Anterolateral Thigh



| Age | Disease | Brand | Reconstitute | Method & Site | Notes |
|--|---|--|--------------|------------------|--|
| Birth | Hepatitis B - usually offered in hospital | H-B-VaxII paediatric or Engerix B paediatric | | IM / AL | Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours and must be given within 7 days. |
| | Respiratory Syncytial Virus (Nirsevimab) | Beyfortus | | IM / AL | Infants who are protected through maternal RSV vaccination do not routinely require nirsevimab. For further information refer to the QPRSVP Program . Nisevimab: Note dose is weight and age dependent. Can be given at the same time as hepatitis B vaccine. |
| | Tuberculosis (<5 years living in Aboriginal and Torres Strait Islander communities) | BCG | R | Intradermal / DL | For further information refer to the <u>Queensland Health BCG Vaccination</u> page. |
| 2 months (Can be given from 6 weeks) AND 4 months | Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, Haemophilus influenzae type b (Hib) | Infanrix hexa or Vaxelis | R | IM / AL | |
| | Rotavirus | Rotarix | | Oral | The first dose must be given by 14 weeks and 6 days. The second dose must be given by 24 weeks and 6 days. |
| | Pneumococcal | Prevenar 13 | | IM / AL | |
| | Meningococcal B | Bexsero | | IM / AL | Prophylactic paracetamol recommended. Refer to the <u>Australian Immunisation Handbook.</u> |
| 6 months | Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, Haemophilus influenzae type b (Hib) | Infanrix hexa or Vaxelis | R | IM / AL | |
| | Pneumococcal (Aboriginal and Torres Strait Islander) | Prevenar 13 | | IM / AL | An additional (3rd) dose of Prevenar 13 is required for Aboriginal and Torres Strait Islander Children |
| | Pneumococcal (specified medical risk conditions) | Prevenar 13 | | IM / AL | All children with specified medical risk conditions for pneumococcal disease. Refer to the <u>Australian Immunisation Handbook.</u> |
| | Meningococcal B (specified medical risk conditions) | Bexsero | | IM / AL | Prophylactic paracetamol recommended. Refer to the <u>Australian Immunisation Handbook.</u> |
| 6 months to <5 years (annually) | Influenza | Age appropriate | | Age appropriate | Administer annually. In children aged 6 months to less than 9 years of age in the first year of administration, give 2 doses a minimum of 4 weeks apart. One dose annually in subsequent years. Information on age appropriate vaccines is available in the <u>Australian Immunsiation Handbook</u> or the annual ATAGI advice on seasonal influenza vaccines. |
| 12 months | Meningococcal ACWY | Nimenrix | R | IM / DL | |
| | Measles, mumps, rubella | M-M-R II or Priorix | R | IM or SC / DL | Children from 6 months of age travelling to measles endemic countries or where measles outbreaks are occuring, both in Australia and overseas are recommended and funded to receive MMR vaccine. Refer to the Immunisation Schedule Queensland page. |
| | Meningococcal B | Bexsero | | IM / DL | Prophylactic paracetamol recommended. Refer to the <u>Australian Immunisation Handbook.</u> |
| | Pneumococcal | Prevenar 13 | | IM / DL | |
| | Hepatitis B (Low birth weight (<2000g) and pre-term babies (<32 weeks gestation) | H-B-Vax II paediatric OR Engerix B paediatric | | IM / DL | Low birth weight (<2000g) and pre-term babies (<32 weeks gestation). |
| 18 months | Haemophilus influenzae type b (Hib) | ActHIB | R | IM / DL | |
| | Measles, mumps, rubella, varicella | Priorix-Tetra | R | IM or SC / DL | |
| | Diphtheria, tetanus, pertussis (whooping cough) | Infanrix or Tripacel | | IM / DL | |
| | Hepatitis A (Aboriginal and Torres Strait Islander) | Vaqta Paediatric | | IM / DL | First dose of the 2-dose hepatitis A vaccination schedule if not previously received a dose. |
| 4 years | Diphtheria, tetanus, pertussis (whooping cough), polio | Infanrix IPV or Quadracel | | IM / DL | |
| | Pneumococcal (children with specified medical risk conditions) | Pneumovax 23 | | IM / DL | Administer first dose of Pneumovax 23 at age 4 years, followed by second dose of Pneumovax 23 at least 5 years later. Refer to the <u>Australian Immunisation Handbook</u> for specified risk conditions and more information. |
| | Pneumococcal (Aboriginal and Torres Strait Islander) | Pneumovax 23 | | IM / DL | |
| | Hepatitis A (Aboriginal and Torres Strait Islander) | Vaqta Paediatric | | IM / DL | |
| > 5 years Influenza | Influenza (children with specified medical risk conditions) | Age appropriate | | IM / DL | Administer annually. In children aged 6 months to less than 9 years of age in the first year of |
| | Influenza (Aboriginal and Torres Strait Islander) | Age appropriate | | IM / DL | administration, give 2 doses a minimum of 4 weeks apart. One dose annually in subsequent years. Information on age appropriate vaccine is available in the <u>Australian Immunisation Handbook</u> or the annual ATAGI advice on seasonal influenza vaccines. |