

IMMUNISATION IN MIDDLE CHILDHOOD & ADOLESCENCE

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16-24 MONTHS

Next Vaccination Date:

/ /

DATE OF VACCINATION
(mm/dd/yyyy):

DPT
Booster-1

/ /

Vitamin
A-2

/ /

MR-2

/ /

JE-2

/ /

OPV
Booster

/ /

/ /

5-6 YEARS

Next Vaccination Date:

/ /

DATE OF VACCINATION
(mm/dd/yyyy):

DPT
Booster-2

/ /

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10 YEARS

Next Vaccination Date:

/ /

DATE OF VACCINATION
(mm/dd/yyyy):

TT

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16 YEARS

[Return Card to ANM]

DATE OF VACCINATION
(mm/dd/yyyy):

TT

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VITAMIN A 3-9

DATE OF ADMINISTRATION
(mm/dd/yyyy):

Vit-A-3

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Vit-A-4

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Vit-A-5

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Vit-A-6

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Vit-A-7

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Vit-A-8

/ /

Vit-A-9

/ /

MISSED DOSE TRACKING

NAME	DATE OF VACCINATION	REASON	NEXT VACCINATION DATE	ANM INITIAL
	/ /		/ /	
	/ /		/ /	
	/ /		/ /	
	/ /		/ /	



Be Wise!
Get your child
fully immunized

Immunization Essentials

VACCINATION NAME	BIRTH	1 ^{1/2} Months	2 ^{1/2} Months	3 ^{1/2} Months	9 Months	1 ^{1/2} Years
BCG prevents tuberculosis	✓					
HepB prevents liver disease	✓					
OPV prevents polio	✓	✓	✓	✓		✓
IPV prevents polio		✓		✓		
Penta prevents whooping cough, diphtheria, tetanus Hep B and Hib infections		✓	✓	✓		
PCV prevents pneumonia		✓		✓	✓	
Rota prevents diarrhoea		✓	✓	✓		
MR prevents measles, rubella					✓	✓
JE Prevents brain fever					✓	✓
DPT prevents whooping cough, diphtheria and tetanus						✓

Table I IAP Immunization Timetable 2020/21: IAP Recommended Vaccines for Routine Use

<i>Age</i>	<i>Vaccine</i>	<i>Comments</i>
Birth	BCG	BCG: before discharge
	OPV	OPV: as soon as possible after birth
	Hepatitis B-1 (BD)	Hep B should be administered within 24 hours of birth
6 week	DTwP/DTaP-1	DTwP or DTaP may be administered in primary immunization
	IPV-1	IPV: 6-10-14 weeks is the recommended schedule. If IPV,
	Hib-1	as part of a hexavalent combination vaccine, is unaffordable,
	Hep B-2	the infant should be sent to a government facility for primary
	Rotavirus-1	immunization as per UIP schedule.
	PCV-1	
10 week	DTwP/DTaP-2	RV1: 2 -dose schedule; all other rotavirus brands: 3-dose schedule
	IPV-2	
	Hib-2	
	Hep B-3	
	Rotavirus-2	
	PCV-2	
14 week	DTwP/DTaP-3	An additional 4th dose of Hep B vaccine is safe and is permitted as
	IPV-3	a component of a combination vaccine
	Hib-3	
	Hep B-4	
	Rotavirus-3	
	PCV-3	

6 month	Influenza (IIV)-1	Uniform dose of 0.5 ml for DCGI approved brands
7 month	Influenza (IIV)-2	To be repeated every year, in pre-monsoon period, till 5 y of age
6-9 month	Typhoid conjugate vaccine	As of available data, there is no recommendation for a booster dose
9 month	MMR -1	
12 month	Hepatitis A	Single dose for live attenuated vaccine
15 month	MMR-2, Varicella -1, PCV booster	
16-18 month	DTwP/DTaP-B1, Hib-B1, IPV-B1	
18-19 month	Hep A-2, Varicella-2	Only for inactivated Hep A vaccine
4-6 year	DTwP/DTaP-B2, IPV-B2, MMR-3	
10-12 year	Tdap, HPV	Tdap is to be administered even if it has been administered earlier (as DTP-B2) HPV: 2 doses at 6 mo interval between 9-14 y; 3 doses: from 15 y or immunocompromised of any age (0-1-6 mo for HPV2, 0-2-6 mo for HPV4)

Age in completed weeks/months/years.

Vaccine	Age in completed weeks/months/years																
	Birth	6w	10w	14w	6m	7m	9m	12m	13m	15m	16-18m	18-24m	2-3 Y	4-6 Y	9-14 Y	15- 18 Y	
BCG																	
Hepatitis B	HB 1 ^a	HB 2	HB 3	HB 4 ^b													
Polio	OPV	IPV 1 ^c	IPV 2 ^c	IPV 3 ^c							IPV ^c B1			IPV ^c B2			
DTwP/DTaP		DPT 1	DPT 2	DPT 3							DPT B1			DPT B2			
Hib		Hib 1	Hib 2	Hib 3							Hib B1						
PCV		PCV 1	PCV 2	PCV 3				PCV B									
Rotavirus		RV 1	RV 2	RV 3 ^d													
Influenza					Dose 1 ^e	Dose 2	Annual Vaccination										
MMR							Dose 1			Dose 2				Dose 3			
TCV																	
Hepatitis A								Dose 1				Dose 2 ^f					
Varicella										Dose 1		Dose 2 ^g					
Tdap ^h /Td																	
HPV															1 & 2 ⁱ	1, 2 & 3 ^j	
Meningococcal ^k							Dose 1	Dose 2									
JE								Dose 1	Dose 2								
Cholera								Dose 1	Dose 2								
PPSV 23																	
Rabies																	
Yellow Fever																	

Recommended age

Catch up age range

Vaccines in special situations

CHILD IMMUNIZATION RECORD (உயிர் தடுப்பூசி பதிவுரை)

Age (Completed Weeks / Months / year)	Vaccines	Due Date	Date of Administration	Remarks
Birth	BCG OPV 0 Hep-B1			
6 Weeks	DtwP1 IPV-1 Hep-B2 Hib-1 Rotavirus - 1 PCV - 1			
10 Weeks	DTwP 2 IPV - 2 Hib - 2 Rotavirus - 2 PCV - 2			
14 Weeks	DTwP 3 IPV - 3 Hib - 3 Rotavirus - 3 PCV - 3			
6 Months	OPV - 1 Hep - B3			
9 Months	MMR - 1 OPV - 2			
9 to 12 Months	Typhoid Conjugate Vaccine			
12 Months	Hep A1			
15 Months	MMR - 2 Varicella - 1 PCV Booster			
16 to 18 Months	DTwPB1/DTap B1 IPV B1 Hib - B1			
18 Months	Hep A2			
2 Years	Typhoid Booster (Conjugate) or Typhoid (Polysaccharide)			
4 to 6 Years	DTwPB2/DTap B2 OPV 3 Varicella - 2 Typhoid Booster (Polysaccharide)			
10 to 12 Years	Tdap/Td HPV for Girls			
Optional Vaccine	Influenza Meningococcal			

Parents to Note :

1. Immunization can be given in the presence of a minor illness.
2. After the immunization reactions are usually mild.
3. Prior to immunization, inform your doctor if the child has had any significant reactions to the last dose.

பெற்றோர்களுக்கான கவனத்திற்கு

1. சிறிது அளவு உயர்நிலைகள் (சளி போன்றவை) இருக்கும் போதும் கூட குழந்தைகளுக்கு தடுப்பூசி போடலாம்.
2. தடுப்பூசிபின் பின்விளைவுகள் சிறிது அளவே ஆகும். (காய்ச்சல் போன்றவை)
3. தடுப்பூசி போடும் போது இதற்கு முன்பு போட்ட தடுப்பூசிபின்னால் ஏற்பட்ட விளைவுகளை மருத்துவரிடம் தெரிவிக்கவும்.

OTHER ADDITIONAL SERVICES :

VITAMIN A

ZINC

DE-WORMING

CHILD RIGHTS EDUCATION

NUTRITIONAL EDUCATION

OTHER SERVICES

HOME VISIT

FOLLOW UP VISIT



Thank you