ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM VACCINES TO PREVENT DIPHTHERIA, TETANUS AND PERTUSSIS

The purpose of this resolution is to revise the previous resolution to incorporate new recommendations regarding the vaccination of pregnant adolescents.

VFC resolution 6/11--2 is repealed and replaced by the following:

Eligible Groups

Children and adolescents aged 6 weeks through 18 years.

Recommended Schedule for Diphtheria, Tetanus, and Pertussis Vaccines

Dose	Age
Primary 1	2 months
Primary 2	4 months
Primary 3	6 months
First Booster (1)	15-18 months
Second Booster (2)	4-6 years
Tdap or Td Booster (3)	11-12 years

- (1) The first booster dose may be administered as early as age 12 months, provided 6 months have elapsed since the third dose.
- (2) The second booster is not necessary before entering kindergarten or elementary school if fourth dose is administered on or after the fourth birthday.
- (3) Tdap is preferred over Td as adolescents are susceptible to pertussis due to waning immunity. A Tdap or Td booster is recommended at any age from 11 through 18 years if they have completed the recommended childhood DTP/DTaP vaccination series and have not received a Td dose. In some special situations, Td, rather than Tdap may be indicated (more information is available at: http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e).

DTaP, DT, Tdap, and Td vaccine formulations

There are currently two licensed formulations of Tdap for adolescents, BOOSTRIX® and ADACEL®. BOOSTRIX® (Tdap) vaccine is indicated for active immunization of persons 10 years and older. ADACEL™ (Tdap) is indicated for active immunization of persons aged 11 years and older. Td vaccine is indicated for active immunization of persons 7 years of age or older for prevention of tetanus and diphtheria. For immunization of infants and children younger than 7 years of age against pertussis, tetanus and diphtheria, refer to the manufacturers' package inserts for Diphtheria and Tetanus Toxoids and Acellular Pertussis Vaccine Adsorbed (DTaP) or combination vaccines containing DTaP and for Diphtheria and Tetanus Toxoids Adsorbed (For Pediatric Use) (DT). Use diphtheria and tetanus toxoids, adsorbed (DT or Td) if encephalopathy has occurred after administration of a previous dose of pertussis-

containing vaccine. The use of brand names is not meant to preclude the use of other comparable licensed vaccines.

Dosage Intervals for	Minimum	Minimum interval between doses			
Vaccination for Diphtheria, Tetanus, and Pertussis	Age	Dose 1 to 2	Dose 2 to 3	Dose 3 to 4	Dose 4 to 5
Containing Vaccines Vaccine					
DTaP	6 weeks	4 weeks	4 weeks	6 months	6 months (1)
DTaP-HepB-IPV(2)	6 weeks	4 weeks	4 weeks		
DTaP-Hib-IPV(3)	6 weeks	4 weeks	4 weeks	6 months	
DT	6 weeks	4 weeks	4 weeks	6 months	6 months (1)
DTaP-Hib(4)	15-18 months			6 months	
DTaP-IPV(5)	4 years				6 months (1)
Tdap/Td(6)	11 years				
Tdap/Td Catch –up schedule(7)	7 years	4 weeks	6 months	5 years	

Note: DT containing vaccines are not indicated for children older than 6 years of age.

- (1) The fifth dose is not necessary if the fourth dose was given after the fourth birthday.
- (2) The combined DTaP-HepB-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-HepB-IPV vaccine is approved for the primary series only (Doses 1-3). For adequate immune response, the last dose of hepatitis B vaccine should be given at ≥24 weeks of age and therefore this combination vaccine should not be administered as a complete primary series on an accelerated schedule at 4 week intervals for prevention of pertussis.
- (3) The combined DTaP-Hib-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-Hib-IPV vaccine is approved for the primary series and first booster dose (Doses 1-4). The combined DTaP-Hib-IPV vaccine is not indicated for children 5 years of age and older.
- (4) The combined DTaP/Haemophilus influenzae type b (Hib) vaccine is only indicated for the fourth dose at age 15 through 18 months.
- (5) The combined DTaP-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-IPV vaccine is approved for the booster dose at age 4 through 6 years.
- (6) Tdap is indicated for a single booster dose at age 11 or 12 years if the childhood DTP/DTaP vaccination series has been completed. Tdap is preferred over Td as adolescents are susceptible to pertussis due to waning immunity, though Td may be indicated rather than

Tdap in special situations (more information is available at: http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e). Adolescents who did not receive Tdap at age 11 or 12 should receive a single dose of Tdap in place of a single Td booster dose. Tdap can be administered regardless of interval since the last tetanus or diphtheria containing vaccine.

- (7) Adolescents who are pregnant should receive Tdap, irrespective of past history of Tdap receipt. If not administered during pregnancy, Tdap should be administered immediately postpartum.
- (8) Tdap should be given to children 7 through 18 years of age who have received tetanus and diphtheria containing vaccines (DT or Td) instead of DTP/DTaP for some or all doses of the childhood series; have received fewer than 5 doses of DTP/DTaP or 4 doses if the fourth dose was administered at age 4 years or older; or have never been vaccinated against tetanus, diphtheria, or pertussis (no doses of pediatric DTP/DTaP/DT or Td). The preferred schedule is a single Tdap dose, followed by a dose of Td four weeks after the first dose and a second dose of Td 6-12 months later. If not administered as the first dose, Tdap can be substituted for any of the other Td doses in the series. More information about the catch-up is available in Appendix D at:

 http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e. Of note, this appendix which was designed to provide catch up guidance for adolescents aged 11 through 18 years, now applies to children aged 7 through 18 years. Tdap is preferred over Td as adolescents are susceptible to pertussis due to waning immunity, though Td may be indicated rather than Tdap in special situations (more information is available at:

http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e).

Recommended Dosages

Refer to product package inserts.

Contraindications and Precautions

Contraindications and precautions can be found at:

- http://www.cdc.gov/mmwr/preview/mmwrhtml/00041645.htm
- http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm?s_cid=rr5503a1_e

[If an ACIP recommendation regarding vaccination to prevent diphtheria, tetanus, and pertussis is published within 12 months following this resolution, the relevant language above (except in the eligible groups sections) will be replaced with the language in the recommendation and incorporated by reference to the publication URL.]

Adopted and Effective: October 24, 2012

This document can be found on the CDC website at: http://www.cdc.gov/vaccines/programs/vfc/downloads/resolutions/1012-1-dtap.pdf