

**Standard Vaccination Catch-up Recommendations for children aged <10 years**  
(adapted from The Australian Immunisation Handbook 10<sup>th</sup> edition [updated online]).

Public Health Services **Immunisation**  
Department of **Health**



Vaccine	Current age						Minimum dose interval between dose 1 and 2	Minimum dose interval between dose 2 and 3	Minimum dose interval between dose 3 and 4	Minimum dose interval between dose 4 and 5
	6 weeks to <4 months	4 to <6 months	6 to <12 months	12 to 18 months	>18 mths to <4 years	4 years to <10 years				
	<b>Doses required</b>									
<b>DTPa</b>	1	2	3	3	4	5 <sup>1</sup>	4 weeks	4 weeks	6 months	6 months
<b>Poliomyelitis (IPV)</b>	1	2	3	3	3	4 <sup>2</sup>	4 weeks	4 weeks	4 weeks	Not required
<b>Hepatitis B<sup>3</sup></b> (excl. birth dose)	1	2	3	3	3	3	1 month <sup>4</sup>	2 - 3 months <sup>4</sup>	Not required	Not required
<b>MMR<sup>5</sup></b>	If given at <11 months of age the 1 <sup>st</sup> dose should be repeated at 12 months of age.			1	2	2	4 weeks	Not required	Not required	Not required
<b>MenCCV/4vMenCV</b>	If given at <11 months of age a booster dose is required at 12 months of age or 8 weeks after last dose, whichever is later.			1	1	1	Not required	Not required	Not required	Not required
<b>Varicella<sup>5</sup></b>	If given at <12 months of age, the dose should be repeated, preferably at 18 months of age.				1 <sup>6</sup>	1 <sup>6</sup>	Not required	Not required	Not required	Not required
<b>Rotavirus</b>	<i>Age limits apply - see Handbook Table</i>		<b>NO CATCH-UP</b>							
<b>Meningococcal B</b> (Aboriginal children only)	<a href="#">See Handbook Table: Recommendations for immunisation of infants and children aged &lt;2 years using meningococcal B vaccine<sup>7</sup></a>						Recommended interval b/w primary doses is 8 weeks. Booster doses are given >12 months or 8 weeks after the 2nd dose, whichever is later.			
<b>Haemophilus influenzae type B (Hib)</b> – No catch-up > 5 years.	<a href="#">See Handbook Table: Catch-up schedule for Hib vaccination for children &lt;5 years of age<sup>8</sup></a>						Recommended interval b/w primary doses is 4 weeks. Booster doses are given >18 months or 8 weeks after the last dose, whichever is later.			
<b>Pneumococcal (PCV)</b> - No catch-up > 5 years for healthy kids.	<a href="#">See Handbook Table: 20vPCV catch-up (born before 1 March 2025)<sup>8</sup></a> <a href="#">See Handbook Table: 20vPCV catch-up (born after 1 March 2025)<sup>8</sup></a>						Recommended interval b/w doses is 4 weeks if aged <12 months and 8 weeks if ≥12 months.			

<sup>1</sup> Unless dose 4 received at >3.5 years of age, then dose 5 is not needed.

<sup>2</sup> A booster dose of IPV is recommended at 4 years of age. If the 4<sup>th</sup> dose was given before 3.5 years of age, it should be repeated. If 3<sup>rd</sup> dose of IPV is given after 4 years of age, a 4<sup>th</sup> dose is *not required*.

<sup>3</sup> Acceptable alternate overseas schedule: Monovalent Hep B vaccine at birth, 1-2 months and 6-18 months of age if given overseas.

<sup>4</sup> MINIMUM interval between dose 1 and 3, is 4 months. MINIMUM interval between dose 2 and 3 is 2 months (however, the optimum schedule is 0, 1 & 6 months). The MINIMUM age for dose 3 is 24 weeks.

<sup>5</sup> MMRV is not recommended for use as the 1<sup>st</sup> dose of MMR containing vaccine in children aged <4yrs. **ANY live vaccines can be given on the same day, if not there must be a minimum interval of 4 weeks.**

<sup>6</sup> Two doses are recommended but only one is funded.

<sup>7</sup> Doses required depends on age the course was commenced.

<sup>8</sup> Required doses vary depending on age at presentation and age when vaccine received; therefore tables must be referred to for each new catch-up.