

# Immunisation catch-up program template

## For children currently aged from 10 years up to 11 years [<11 years]

### with **NO** documented history of vaccination

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#### **Important information:**

- Vaccines marked with an asterisk \* are linked to family payments.
- For each catch-up complete an Immunisation History Form. Fill in Part A, Part B [only need to ✓ 'on a catch-up program'] and sign Part C then fax to Australian Immunisation Register (AIR) **Fax no: 08 9254 4810**.
- This funded '**expanded catch-up program**' for ≥10 years will **not** include dTpa-IPV, MMRV or ADT vaccines. There may be some variation in vaccine QIP supply until all current stock is used.
- Sources for checking vaccination records: AIR records; VIVAS records; Personal Health Record Book; patient records; previous service provider.

#### **Do not use:**

- Infanrix-Hexa; Infanrix-IPV, Infanrix/Tripacel and Menitorix vaccines are not registered for people aged ≥10 years.
- Priorix-Tetra and ProQuad (combination MMRV vaccines) are **no longer funded** for ≥10 years.

*Refer to the electronic version of the Australian Immunisation Handbook (AIH) 10th edition Table 2.1.12 for further details*

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#### **Due now:**

*Live vaccines [MMR and Varicella] must be given on the same day in separate limbs or one month apart.*

*Priorix-Tetra & ProQuad [MMRV] vaccines are **not** funded for this program*

**Boostrix or Adacel** [dTpa vaccine ]\* dose 1

**IPOL** [inactivated polio vaccine]\* dose 1

**NeisVac-C** [Meningococcal C vaccine] dose 1

**HB VAX-II or Engerix B** [paed] [hepatitis B vaccine - paediatric]\* dose 1

**M-M-R II or Priorix vaccine** [Measles/Mumps/Rubella vaccine]\* dose 1

**Varivax or Varilrix** [VZV vaccine] dose 1

*Note: If these vaccines are started at different times ensure the minimum spacing between vaccines containing the same antigens is adhered to.*

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#### **Then, one month later give:**

**Boostrix or Adacel** [dTpa vaccine ]\* dose 2

**IPOL** [inactivated polio vaccine]\* dose 2

**HB VAX-II or Engerix B** [paed] [hepatitis B vaccine - paediatric]\* dose 2

**M-M-R II or Priorix vaccine** [Measles/Mumps/Rubella vaccine]\* dose 2

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#### **Then, one month later give:**

**Boostrix or Adacel** [dTpa vaccine ]\* dose 3

**IPOL** [inactivated polio vaccine]\* dose 3

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#### **Then, two months later give:**

**HB VAX-II or Engerix B** [paed] [hepatitis B vaccine - paediatric]\* dose 3  
[give at least 3 months after dose 2 of hepatitis B vaccine]

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