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| Victorian catch-up vaccination guidelines for 10 years and older |
| Information for immunisation providers |
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## Eligibility for funded vaccines

All vaccines listed in the [National Immunisation Program (NIP) Schedule](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) are free. Eligibility for NIP-funded vaccines is linked to [eligibility for Medicare benefits.](https://www.servicesaustralia.gov.au/individuals/subjects/how-enrol-and-get-started-medicare/enrolling-medicare#whocan)

[Catch-up vaccines](https://www.health.gov.au/topics/immunisation/immunisation-information-for-health-professionals/catch-up-immunisations) are NIP-funded for all people up to 20 years of age (and people aged 25 years and under who have missed human papillomavirus (HPV) vaccination).

Refugees and humanitarian entrants aged 20 years and over are eligible for the following vaccines if they were missed. Refer to the [Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/) (the handbook) for timing of doses.

Diphtheria-tetanus-pertussis

Varicella (chickenpox)

Poliomyelitis

Measles-mumps-rubella

Hepatitis B

HPV (up to and including age 25)

* [NIP-funded schedules](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) are recommended for people with certain medical conditions that increase risk for severe disease for the following vaccines. Refer to the [handbook](https://immunisationhandbook.health.gov.au/) for timing of doses (schedules not included in these tables).
* Pneumococcal
* Meningococcal
* Haemophilus influenzae type b (Hib)
* Influenza
* Zoster (shingles)
* HPV

Additional vaccines for people aged 20 years and over are funded under the [Victorian Immunisation schedule](https://www.health.vic.gov.au/immunisation/immunisation-schedule-victoria-and-vaccine-eligibility-criteria),

## How to read the tables in the catch-up guideline

These guidelines have been developed to assist immunisation providers develop a catch-up plan for people aged 10 years and over. Always refer to the principles contained within [the handbook](https://immunisationhandbook.health.gov.au/).

* The [1st visit](#_Catch-up_worksheet_for) refers to the day the first vaccinations are given as a catch-up.
* [Intervals](#_Table_2._) refers to the minimum time interval required between the doses of vaccines.
* [Current age](#_Immunisation_Catch-Up_Worksheet) refers to the age at presentation used to guide choice of the correct vaccine and schedule.
* Refer to Table 1 for antigen and the vaccine brands used in these guidelines which are funded under the NIP.
* Refer to [the Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/sites/default/files/2021-09/cdc-foreign-products-tables-may-2019_0.pdf) for a list of foreign vaccines by trade names.

## Table 1. Antigens and vaccine brands

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| --- | --- |
| **Antigen(s) (abbreviation)** | **Vaccine brands®** |
| Diphtheria-Tetanus-Pertussis (dTpa) | Boostrix or Adacel |
| Poliomyelitis (IPV) | IPOL |
| Hepatitis B (Hep B) | H-B-Vax II Adult/Paediatric or Engerix B Adult/Paediatric |
| Measles-Mumps-Rubella (MMR) | M-M-R-II or Priorix |
| Varicella  | Varivax |
| Meningococcal ACWY  | Nimenrix |
| Human papillomavirus (HPV) | Gardasil 9 |
| Pneumococcal  | Prevenar 13 (13vPCV) Pneumovax 23 (23vPPV) – maximum of two lifetime doses |
| Influenza | Annually as supplied. See recommendations from the [Australian Technical Advisory Group on Immunisation (ATAGI).](https://www.health.vic.gov.au/immunisation/seasonal-influenza-vaccine) |
| Zoster (shingles) | Shingrix |

#### Translating immunisation records

Refer to the handbook for links to aids to assist translating overseas immunisation records:

* [Foreign language terms](https://immunisationhandbook.health.gov.au/sites/default/files/2021-09/cdc-foreign-products-tables-may-2019_0.pdf)
* [Quick Chart of Vaccine-Preventable Disease Terms in Multiple Languages](https://www.immunize.org/catg.d/p5122.pdf)

Encourage clients to provide a translated immunisation history if the original record is not in English. Eligible people may be referred to Department of Home Affairs’ [Free Translating Service](https://translating.homeaffairs.gov.au/en) to have their immunisation records translated by an accredited translator free of charge.

## Table 2. Standard vaccination catch-up recommendations for healthy people aged 10 – 19 years

Adapted from the [Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/), and the [National Immunisation Program schedule](https://www.health.gov.au/resources/puMen%20Cblications/national-immunisation-program-schedule?language=en) October 2023.

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| --- | --- | --- | --- | --- |
| **Vaccine**  | **Doses required** | **Min. interval between** **dose 1 and 2** | **Min. interval between** **dose 2 and 3** | **Notes** |
| Diphtheria, tetanus, pertussis (dTpa) | 3 doses | 4 weeks | 4 weeks | Booster dose of dTpa is offered in Year 7 school program (12-13 years  |
| Poliomyelitis (IPV) | 3 doses | 4 weeks | 4 weeks |  |
| Hepatitis B¹(Hep B)  | 10-19 years\* | 3 paediatric doses | 1 month | 2 - 3^ months | \* The age groups overlap - this is an either/or, not both. ^ Minimum interval between dose 1 & 3 is 4 months (however, optimum dose schedule is 0, 1 & 6 months)  |
| 11-15 years\* | 2 adult doses | 4 months | Not required |
| Measles, mumps, rubella - MMR¹  | 2 doses | 4 weeks | Not required |  |
| Meningococcal ACWY¹ | 15-19 years | 1 dose  | Not required | Not required | Men ACWY is offered in Year 10 school program (14-16 years |
| Varicella¹ | < 14 years | 1 dose | Not required | Not required | 1 dose funded under NIP for people <14 years2 doses funded under NIP for people ≥ 14 years. MMRV combined vaccine is not recommended for use in people ≥ 14 years |
| ≥ 14 years | 2 doses | 4 weeks  | Not required |
| Human papillomavirus² (HPV) | 9-25 years (inc.) | 1 dose | Not required | Not required | Single dose NIP funded for people 9 - 25 years of age. Offered in Year 7 school program (12 –13 years) |

¹Consider serology to assess for MMR, varicella and Hep B immunity.

² See [NIP-funded schedules](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) for Meningococcal ACWY/B, Pneumococcal, Haemophilus influenzae type b (Hib), and HPV are recommended for people with certain medical risk conditions. [NIP-funded](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) seasonal influenza vaccine is available for the people at higher risk of complications from influenza.

## Table 3. National Immunisation Program (NIP) and Victorian funded vaccines for people aged ≥ 20 years - no immunisation records

Adapted from the [Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/), the [National Immunisation Program schedule](https://www.health.gov.au/resources/puMen%20Cblications/national-immunisation-program-schedule?language=en) and [Victorian Immunisation schedule](https://www.health.vic.gov.au/immunisation/immunisation-schedule-and-vaccine-eligibility-criteria) October 2023

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| Vaccine eligibility  | Vaccine to give at 1st visit | 2nd visit | 3rd visit | 4th visit |
| 1 month after 1st visit | 1 month after 2nd visit | 3 months after 2nd visit  |
| 20 years to 25 years | HPV¹ |  |  |  |
| Refugees & asylum seekers¹  | dTpa + IPV + MMR + Varicella + Hep B  | dTpa + IPV + MMR + Varicella + Hep B | dTpa + IPV | Hep B - Minimum interval between dose 1 and dose 3 is 4 months |
| [Vulnerable citizens](https://www.health.vic.gov.au/immunisation/immunisation-schedule-victoria-and-vaccine-eligibility-criteria) | dTpa + IPV + MMR + Hep B  | dTpa + IPV + MMR + Hep B  | dTpa + IPV | Hep B - Minimum interval between dose 1 and dose 3 is 4 months |
| [People at risk of hepatitis B infection](https://www.health.vic.gov.au/immunisation/immunisation-schedule-victoria-and-vaccine-eligibility-criteria#:~:text=Eligibility%20criteria%20for%20Victorian%20Government%20funded%20vaccines)¹ | Hep B | Hep B |  | Hep B - Minimum interval between dose 1 and dose 3 is 4 months |
| Born ≥ 1966 without evidence of 2 doses measles containing vaccine or immunity¹ | MMR | MMR |  |
|  |
| Aboriginal and Torres Strait Islander people ≥ 50 years | 13vPCV  | 23vPPV≥12 months after 13vPCV  | 23vPPV≥ 5 years later after previous 23vPPV |
| Aboriginal and Torres Strait Islander people ≥ 50 years | Zoster (Shingrix®) |  | Zoster (Shingrix®) dose 2≥ 2-6 months apart in immunocompetent adults² |
| Non-Indigenous ≥ 65 years |
| From 70 years * non-Indigenous adults
 | 13vPCV |  |  |

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| ¹Consider serology to assess for MMR, varicella and Hep B immunity²See [NIP-funded schedules](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) for Meningococcal ACWY/B, Pneumococcal, Haemophilus influenzae type b (Hib), HPV and Zoster are recommended for people with certain medical risk conditions.[NIP-funded](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en) seasonal influenza vaccine is available for people at higher risk of complications from influenza. Pregnant women - single dose pertussis vaccine is recommended in each pregnancy, ideally between 20–32 weeks, but may be given up until delivery. Influenza vaccine recommended in each pregnancy, at any stage of pregnancy.Immunisation Catch-Up Worksheet ≥ 10 years

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| [ ]  Aboriginal and Torres Strait Islander |
| [ ]  Medical Condition  |  |
| Reason for catch-up |
| [ ]  Overdue  |  [ ]  Migrant  | [ ]  Refugee  |

Date plan created \_\_\_\_\_\_\_\_\_\_\_ Prepared by ­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Medicare Number cccc ccccc c c *Reference Number beside name* DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Given Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Suburb: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

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| --- | --- | --- | --- | --- |
|  **Vaccine** | **Last dose given (dose number and date)** | **Number of doses needed at current age** | **Dose number due now** | **Further doses (interval or date)****Comments** |
| Diphtheria, tetanus, pertussis - dTpa |   |   |   |   |   |  |  |
| Poliovirus – IPV |   |   |   |   |   |  |  |
| Hepatitis B |   |   |   |   |   |  |  |
| Measles, mumps, rubella - MMR |  |  |  |  |  |  |  |
| Varicella (chickenpox) |  |  |  |  |  |  |  |
| HPV |   |   |   |   |   |  |  |
| Meningococcal ACWY |  |  |  |  |  |  |  |
| Pneumococcal 13 |   |   |   |   |   |  |  |
| Zoster (Shingles) |  |  |  |  |  |  |  |
| Pneumococcal 23 (risk) |  |  |  |  |  |  |  |
| Meningococcal B (risk) |  |  |  |  |  |  |  |

Refer to Tables 2 & 3 and the [Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/), for required doses.

## Resources

Australian Technical Advisory Group on Immunisation (ATAGI) 2022, [Australian Immunisation Handbook,](https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook?language=en) Australian Government Department of Health and Aged Care, Canberra. <https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook?language=en>

Australian Technical Advisory Group on Immunisation (ATAGI) 2022, [Australian Immunisation Handbook, Catch up vaccination](https://immunisationhandbook.health.gov.au/contents/catch-up-vaccination), Australian Government Department of Health and Aged Care, Canberra. <<https://immunisationhandbook.health.gov.au/contents/catch-up-vaccination>>

Australian Technical Advisory Group on Immunisation (ATAGI) 2022, [Australian Immunisation Handbook, Vaccination for migrants, refugees and people seeking asylum in Australia](https://immunisationhandbook.health.gov.au/contents/vaccination-for-special-risk-groups/vaccination-for-migrants-refugees-and-people-seeking-asylum-in-australia), Australian Government Department of Health and Aged Care, Canberra.< <https://immunisationhandbook.health.gov.au/contents/vaccination-for-special-risk-groups/vaccination-for-migrants-refugees-and-people-seeking-asylum-in-australia>>

Department of Health and Aged Care 2023, [National Immunisation Program](https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en), Australian Government.<https://www.health.gov.au/resources/publications/national-immunisation-program-schedule?language=en>

Department of Home Affairs’ 2023 [Free Translating Service](https://translating.homeaffairs.gov.au/en), Australian Government. <https://translating.homeaffairs.gov.au/en>

Minnesota Department of Health Immunization Program and Washington State Department of Health 2019, [Foreign Language terms](https://immunisationhandbook.health.gov.au/sites/default/files/2021-09/cdc-foreign-products-tables-may-2019_0.pdf) in the [Australian Immunisation Handbook,](https://www.health.gov.au/resources/publications/the-australian-immunisation-handbook?language=en) Australian Government Department of Health and Aged Care, Canberra. <https://immunisationhandbook.health.gov.au/sites/default/files/2021-09/cdc-foreign-products-tables-may-2019\_0.pdf>

World Health Organisation 2023 [Immunisation schedules in other countries](https://immunizationdata.who.int/listing.html?topic=vaccine-schedule&location=)  <https://immunizationdata.who.int/listing.html?topic=vaccine-schedule&location=>

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