

For vaccination recommendations for persons ages 19 years or older, see the Recommended Adult Immunization Schedule, 2021.

Additional information

COVID-19 Vaccination

ACIP recommends use of COVID-19 vaccines within the scope of the Emergency Use Authorization or Biologics License Application for the particular vaccine. Interim ACIP recommendations for the use of COVID-19 vaccines can be found at www.cdc.gov/vaccines/hcp/acip-recs/.

- Consult relevant ACIP statements for detailed recommendations at www.cdc.gov/vaccines/hcp/acip-recs/index.html.
- For information on contraindications and precautions for the use of a vaccine, consult the *General Best Practice Guidelines for Immunization* at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html and relevant ACIP statements at www.cdc.gov/vaccines/hcp/acip-recs/index.html.
- For calculating intervals between doses, 4 weeks = 28 days. Intervals of ≥ 4 months are determined by calendar months.
- Within a number range (e.g., 12–18), a dash (–) should be read as “through.”
- Vaccine doses administered ≤ 4 days before the minimum age or interval are considered valid. Doses of any vaccine administered ≥ 5 days earlier than the minimum age or minimum interval should not be counted as valid and should be repeated as age appropriate. **The repeat dose should be spaced after the invalid dose by the recommended minimum interval.** For further details, see Table 3-1, Recommended and minimum ages and intervals between vaccine doses, in *General Best Practice Guidelines for Immunization* at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html.
- Information on travel vaccination requirements and recommendations is available at www.cdc.gov/travel/.
- For vaccination of persons with immunodeficiencies, see Table 8-1, Vaccination of persons with primary and secondary immunodeficiencies, in *General Best Practice Guidelines for Immunization* at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/immunocompetence.html, and Immunization in Special Clinical Circumstances (In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. *Red Book: 2018 Report of the Committee on Infectious Diseases*. 31st ed. Itasca, IL: American Academy of Pediatrics; 2018:67–111).
- For information about vaccination in the setting of a vaccine-preventable disease outbreak, contact your state or local health department.
- The National Vaccine Injury Compensation Program (VICP) is a no-fault alternative to the traditional legal system for resolving vaccine injury claims. All routine child and adolescent vaccines are covered by VICP except for pneumococcal polysaccharide vaccine (PPSV23). For more information, see www.hrsa.gov/vaccinecompensation/index.html.

Diphtheria, tetanus, and pertussis (DTaP) vaccination (minimum age: 6 weeks [4 years for Kinrix or Quadacel])

Routine vaccination

2、4、6、15～18か月、4～6年の5回投与シリーズ
 -前向き：用量3から少なくとも6か月が経過していれば、用量4は早ければ12か月齢で投与できます。
 -遡及的：投与3から少なくとも4か月が経過していれば、12か月齢という早い時期に誤って投与された4回目の投与がカウントされる場合があります。

Catch-up vaccination

用量4が4歳以上で、用量3の少なくとも6か月後に投与された場合、用量5は必要ありません。
 その他のキャッチアップガイドダンスについては、表2を参照してください

Special situations

- 破傷風トキソイド含有ワクチンの3回以上の接種歴がある7歳未満の小児の創傷管理：きれいな創傷と軽傷を除くすべての創傷に対して、破傷風トキソイド含有ワクチンの最後の投与から5年以上経過している場合はDTaPを投与します。詳細については、www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm.

Haemophilus influenzae type b vaccination (minimum age: 6 weeks)

Routine vaccination

- ActHIB、Hiberix、またはPentacel：2、4、6、12～15か月の4回投与

Catch-up vaccination

7～11か月齢の用量1：少なくとも4週間後に用量2を投与し、12～15か月または用量2の8週間後（いずれか遅い方）に用量3（最終用量）を投与します。
 12～14か月齢の用量1：用量1の少なくとも8週間後に用量2（最終用量）を投与します。
 12ヶ月前に1回、1歳前に2回
 15ヶ月：投与2の8週間後に投与3（最終投与）を投与します。
 15ヶ月以上で1回投与：それ以上の投与は必要ありません
 15～59か月齢でワクチン未接種：1回投与します。
 高リスクとはみなされない60ヶ月以上の以前に予防接種を受けていない子供：キャッチアップ予防接種を必要としない
 その他のキャッチアップガイドダンスについては、表2を参照してください。

Special situations

Chemotherapy or radiation treatment:

12–59 months

- Unvaccinated or only 1 dose before age 12 months: 2 doses, 8 weeks apart

- 2 or more doses before age 12 months: 1 dose at least 8 weeks after previous dose

Doses administered within 14 days of starting therapy or during therapy should be repeated at least 3 months after therapy completion.

Hematopoietic stem cell transplant (HSCT):

- 3-dose series 4 weeks apart starting 6 to 12 months after successful transplant, regardless of Hib vaccination history

Anatomic or functional asplenia (including sickle cell disease):

12–59 months

- Unvaccinated or only 1 dose before age 12 months: 2 doses, 8 weeks apart

- 2 or more doses before age 12 months: 1 dose at least 8 weeks after previous dose

Unvaccinated persons age 5 years or older*

- 1 dose

Elective splenectomy:

Unvaccinated persons age 15 months or older*

- 1 dose (preferably at least 14 days before procedure)

HIV infection:

12–59 months

- Unvaccinated or only 1 dose before age 12 months: 2 doses, 8 weeks apart

- 2 or more doses before age 12 months: 1 dose at least 8 weeks after previous dose

Unvaccinated persons age 5–18 years*

- 1 dose

Immunoglobulin deficiency, early component complement deficiency:

12–59 months

- Unvaccinated or only 1 dose before age 12 months: 2 doses, 8 weeks apart

- 2 or more doses before age 12 months: 1 dose at least 8 weeks after previous dose

*Unvaccinated = Less than routine series (through age 14 months) OR no doses (age 15 months or older)

Notes

Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2021

Hepatitis A vaccination (minimum age: 12 months for routine vaccination)

Routine vaccination

- 2-dose series (minimum interval: 6 months) beginning at age 12 months

Catch-up vaccination

- Unvaccinated persons through age 18 years should complete a 2-dose series (minimum interval: 6 months).
- Persons who previously received 1 dose at age 12 months or older should receive dose 2 at least 6 months after dose 1.
- Adolescents age 18 years or older may receive the combined HepA and HepB vaccine, **Twinrix**[®], as a 3-dose series (0, 1, and 6 months) or 4-dose series (3 doses at 0, 7, and 21–30 days, followed by a booster dose at 12 months).

International travel

- Persons traveling to or working in countries with high or intermediate endemic hepatitis A (www.cdc.gov/travel/):
 - **Infants age 6–11 months:** 1 dose before departure; revaccinate with 2 doses, separated by at least 6 months, between age 12–23 months.
 - **Unvaccinated age 12 months or older:** Administer dose 1 as soon as travel is considered.

Hepatitis B vaccination (minimum age: birth)

Birth dose (monovalent HepB vaccine only)

母親はHBsAg陰性の場合：2,000グラム以上の医学的に安定したすべての乳児に対して出生後24時間以内に1回投与します。2,000グラム未満の乳児：1か月の年代順または退院時に1回投与します（体重が2,000グラム未満の場合でも、どちらか早い方）。

母親はHBsAg陽性場合：

-出生時の体重に関係なく、出生後12時間以内にHepBワクチンとB型肝炎免疫グロブリン（HBIG）を（別々の手足に）投与します。2,000グラム未満の乳児には、生後1か月から3回の追加ワクチン接種（合計4回接種）を行います。
-9～12か月齢でHBsAgおよび抗HBsをテストします。HepBシリーズが遅れる場合は、最終投与の1～2か月後にテストしてください。

母親のHBsAgステータスは不明の場合：

-出生時体重に関係なく、出生後12時間以内にHepBワクチンを投与します。
-2,000グラム未満の乳児の場合、生後12時間以内にHepBワクチンに加えてHBIGを（別々の手足に）投与します。1ヶ月齢からワクチンを3回追加接種（合計4回接種）します。
-母親のHBsAgステータスをできるだけ早く判断します。母親がHBsAg陽性の場合、2,000グラム以上の乳児にHBIGをできるだけ早く、ただし7日以内に投与してください。

Routine series

0、1～2、6～18か月の3回接種シリーズ（6週齢より前に投与される用量には一価HepBワクチンを使用）
出生時投与を受けなかった乳児は、可能な限り早くシリーズを開始する必要があります（表2を参照）。
出生後にHepBを含む混合ワクチンを使用する場合は、4回の投与が許可されます

最終（3回目または4回目）投与の最低年齢：24週間
最小間隔：用量1から用量2：4週間 用量2から用量3：8週間 用量1から用量3：16週間（4用量を投与する場合、これらの計算では「用量3」を「用量4」に置き換えてください）

Catch-up vaccination

- ワクチン未接種の人は、0、1～2、6ヶ月で3回の投与シリーズを完了する必要があります。
- 11～15歳の青年は、投与間隔が4か月以上の代替の2回投与スケジュールを使用できます（成人用製剤Recombivax HBのみ）。
- 18歳以上の青年は、少なくとも4週間間隔で2回接種のHepB（Heplisav-B[®]）を接種することができます。
- その他のキャッチアップガイダンスについては、表2を参照してください。

Special situations

- 免疫状態が正常で、乳幼児、小児、青年、成人の方は再接種をお勧めしません。
- 以下を含む特定の集団では、再ワクチン接種が推奨される場合があります。
 - -HBsAg陽性の母親から生まれた乳児
 - -血液透析患者
 - -他の免疫不全の人
- www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/hepb.html.

Human papillomavirus vaccination

(minimum age: 9 years)

Routine and catch-up vaccination

- HPV vaccination routinely recommended at **age 11–12 years (can start at age 9 years)** and catch-up HPV vaccination recommended for all persons through age 18 years if not adequately vaccinated
- 2- or 3-dose series depending on age at initial vaccination:
 - **Age 9–14 years at initial vaccination:** 2-dose series at 0, 6–12 months (minimum interval: 5 months; repeat dose if administered too soon)
 - **Age 15 years or older at initial vaccination:** 3-dose series at 0, 1–2 months, 6 months (minimum intervals: dose 1 to dose 2: 4 weeks / dose 2 to dose 3: 12 weeks / dose 1 to dose 3: 5 months; repeat dose if administered too soon)
- **Interrupted schedules:** If vaccination schedule is interrupted, the series does not need to be restarted.
- No additional dose recommended after completing series with recommended dosing intervals using any HPV vaccine.

Special situations

- **Immunocompromising conditions, including HIV infection:** 3-dose series as above
- **History of sexual abuse or assault:** Start at age 9 years.
- **Pregnancy:** HPV vaccination not recommended until after pregnancy; no intervention needed if vaccinated while pregnant; pregnancy testing not needed before vaccination

Influenza vaccination

(minimum age: 6 months [IIV], 2 years [LAIV4], 18 years [recombinant influenza vaccine, RIV4])

Routine vaccination

- 毎年、年齢と健康状態に適したインフルエンザワクチンを使用してください。
- -2020年7月1日までにインフルエンザワクチンの接種回数が2回未満である、またはインフルエンザの予防接種歴が不明な6か月から8歳の子供に対して、少なくとも4週間間隔で2回接種する
- -2020年7月1日までにインフルエンザワクチンを2回以上接種した6か月から8歳の子供に1回接種
- -9歳以上のすべての人に1回投与
- For the 2021–22 season, see the 2021–22 ACIP influenza vaccine recommendations.

Special situations

- 卵アレルギー、じんましんのみ：毎年年齢と健康状態に適したインフルエンザワクチンが可能ですが
- じんましん以外の症状（血管性浮腫、呼吸困難、救急医療サービスまたはエピネフリンの必要性など）を伴う卵アレルギー：毎年、年齢と健康状態に注意してインフルエンザワクチンを接種してください。
- ワクチンに対する重度のアレルギー反応は、以前のアレルギー反応の病歴がない場合でも発生する可能性があります。すべての予防接種提供者は、緊急時の計画に精通し、心肺蘇生法の認定を受けている必要があります。
- インフルエンザワクチンに対する以前に重度のアレルギー反応は、インフルエンザワクチンの将来の受領に対する禁忌です。

Notes

Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2021

Measles, mumps, and rubella vaccination (minimum age: 12 months for routine vaccination)

Routine vaccination

- 12~15か月、4~6年の2回投与シリーズ
- 用量2は、用量1の4週間後に投与することができます。

Catch-up vaccination

- ワクチン未接種の子供および青年：少なくとも4週間間隔で2回投与シリーズ
- MMRVの最大使用年齢は12歳です

Special situations

海外旅行

- 生後6~11か月の乳児：出発前に1回投与。生後12~15か月（高リスク地域の子供は12か月）は2回投与シリーズ行い早ければ4週間間隔で2回投与します。
- 生後12か月以上のワクチン未接種の子供：出発の前に少なくとも4週間開けて2回投与シリーズを行う

Meningococcal serogroup A,C,W,Y vaccination (minimum age: 2 months [MenACWY-CRM, Menveo], 9 months [MenACWY-D, Menactra], 2 years [MenACWY-FF, MenQuadfi])

Routine vaccination

- 2-dose series at 11–12 years, 16 years

Catch-up vaccination

- Age 13–15 years: 1 dose now and booster at age 16–18 years (minimum interval: 8 weeks)
- Age 16–18 years: 1 dose

Special situations

Anatomic or functional asplenia (including sickle cell disease), HIV infection, persistent complement component deficiency, complement inhibitor (e.g., eculizumab, ravulizumab) use:

- Menveo**
 - Dose 1 at age 8 weeks: 4-dose series at 2, 4, 6, 12 months
 - Dose 1 at age 3–6 months: 3- or 4- dose series (dose 2 [and dose 3 if applicable] at least 8 weeks after previous dose until a dose is received at age 7 months or older, followed by an additional dose at least 12 weeks later and after age 12 months)
 - Dose 1 at age 7–23 months: 2-dose series (dose 2 at least 12 weeks after dose 1 and after age 12 months)
 - Dose 1 at age 24 months or older: 2-dose series at least 8 weeks apart
- Menactra**
 - Persistent complement component deficiency or complement inhibitor use:**
 - Age 9–23 months: 2-dose series at least 12 weeks apart
 - Age 24 months or older: 2-dose series at least 8 weeks apart
 - Anatomic or functional asplenia, sickle cell disease, or HIV infection:**
 - Age 9–23 months: Not recommended
 - Age 24 months or older: 2-dose series at least 8 weeks apart
 - Menactra** must be administered at least 4 weeks after completion of PCV13 series.

- MenQuadfi**

- Dose 1 at age 24 months or older: 2-dose series at least 8 weeks apart

Travel in countries with hyperendemic or epidemic meningococcal disease, including countries in the African meningitis belt or during the Hajj (www.cdc.gov/travel/):

- Children less than age 24 months:

- Menveo (age 2–23 months)**

- Dose 1 at age 8 weeks: 4-dose series at 2, 4, 6, 12 months
- Dose 1 at age 3–6 months: 3- or 4- dose series (dose 2 [and dose 3 if applicable] at least 8 weeks after previous dose until a dose is received at age 7 months or older, followed by an additional dose at least 12 weeks later and after age 12 months)
- Dose 1 at age 7–23 months: 2-dose series (dose 2 at least 12 weeks after dose 1 and after age 12 months)

- Menactra (age 9–23 months)**

- 2-dose series (dose 2 at least 12 weeks after dose 1; dose 2 may be administered as early as 8 weeks after dose 1 in travelers)

- Children age 2 years or older: 1 dose Menveo, Menactra, or MenQuadfi

First-year college students who live in residential housing (if not previously vaccinated at age 16 years or older) or military recruits:

- 1 dose **Menveo, Menactra, or MenQuadfi**

Adolescent vaccination of children who received MenACWY prior to age 10 years:

- Children for whom boosters are recommended** because of an ongoing increased risk of meningococcal disease (e.g., those with complement deficiency, HIV, or asplenia): Follow the booster schedule for persons at increased risk.
- Children for whom boosters are not recommended** (e.g., a healthy child who received a single dose for travel to a country where meningococcal disease is endemic): Administer MenACWY according to the recommended adolescent schedule with dose 1 at age 11–12 years and dose 2 at age 16 years.

Note: Menactra should be administered either before or at the same time as DTaP. For MenACWY **booster dose recommendations** for groups listed under “Special situations” and in an outbreak setting and additional meningococcal vaccination information, see www.cdc.gov/mmwr/volumes/69/rr/rr6909a1.htm.

Meningococcal serogroup B vaccination (minimum age: 10 years [MenB-4C, Bexsero; MenB-FHbp, Trumenba])

Shared clinical decision-making

- Adolescents not at increased risk** age 16–23 years (preferred age 16–18 years) based on shared clinical decision-making:
 - Bexsero:** 2-dose series at least 1 month apart
 - Trumenba:** 2-dose series at least 6 months apart; if dose 2 is administered earlier than 6 months, administer a 3rd dose at least 4 months after dose 2.

Special situations

Anatomic or functional asplenia (including sickle cell disease), persistent complement component deficiency, complement inhibitor (e.g., eculizumab, ravulizumab) use:

- Bexsero:** 2-dose series at least 1 month apart
- Trumenba:** 3-dose series at 0, 1–2, 6 months

Bexsero and **Trumenba** are not interchangeable; the same product should be used for all doses in a series. For MenB **booster dose recommendations** for groups listed under “Special situations” and in an outbreak setting and additional meningococcal vaccination information, see www.cdc.gov/mmwr/volumes/69/rr/rr6909a1.htm.

Pneumococcal vaccination

(minimum age: 6 weeks [PCV13], 2 years [PPSV23])

Routine vaccination with PCV13

- 4-dose series at 2, 4, 6, 12–15 months

Catch-up vaccination with PCV13

不完全な* PCV13シリーズを含む24~59か月の健康な子供に1回投与
その他のキャッチアップガイダンスについては、表2を参照してください。

Special situations

以下の基本条件：PCV13とPPSV23の両方が示されている場合は、最初にPCV13を投与します。PCV13とPPSV23は、同じ訪問中に投与しないでください。
慢性心疾患（特にチアノーゼ性先天性心疾患と心不全）；慢性肺疾患（高用量の経口コルチコステロイドで治療された喘息を含む）；糖尿病
2~5歳

- Any incomplete* series with:
 - 3 PCV13 doses: 1 dose PCV13 (at least 8 weeks after any prior PCV13 dose)
 - Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)

Age 6–18 years

- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after completing all recommended PCV13 doses)

Cerebrospinal fluid leak, cochlear implant:

Age 2–5 years

- Any incomplete* series with:
 - 3 PCV13 doses: 1 dose PCV13 (at least 8 weeks after any prior PCV13 dose)
 - Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after any prior PCV13 dose)

Age 6–18 years

- No history of either PCV13 or PPSV23: 1 dose PCV13, 1 dose PPSV23 at least 8 weeks later
- Any PCV13 but no PPSV23: 1 dose PPSV23 at least 8 weeks after the most recent dose of PCV13
- PPSV23 but no PCV13: 1 dose PCV13 at least 8 weeks after the most recent dose of PPSV23

Sickle cell disease and other hemoglobinopathies; anatomical or functional asplenia; congenital or acquired immunodeficiency; HIV infection; chronic renal failure; nephrotic syndrome; malignant neoplasms, leukemias, lymphomas, Hodgkin disease, and other diseases associated with treatment with immunosuppressive drugs or radiation therapy; solid organ transplantation; multiple myeloma:

Age 2–5 years

- Any incomplete* series with:
 - 3 PCV13 doses: 1 dose PCV13 (at least 8 weeks after any prior PCV13 dose)
 - Less than 3 PCV13 doses: 2 doses PCV13 (8 weeks after the most recent dose and administered 8 weeks apart)
- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after any prior PCV13 dose) and a 2nd dose of PPSV23 5 years later

Age 6–18 years

- No history of either PCV13 or PPSV23: 1 dose PCV13, 2 doses PPSV23 (dose 1 of PPSV23 administered 8 weeks after PCV13 and dose 2 of PPSV23 administered at least 5 years after dose 1 of PPSV23)
- Any PCV13 but no PPSV23: 2 doses PPSV23 (dose 1 of PPSV23 administered 8 weeks after the most recent dose of PCV13 and dose 2 of PPSV23 administered at least 5 years after dose 1 of PPSV23)
- PPSV23 but no PCV13: 1 dose PCV13 at least 8 weeks after the most recent PPSV23 dose and a 2nd dose of PPSV23 administered 5 years after dose 1 of PPSV23 and at least 8 weeks after a dose of PCV13

Chronic liver disease, alcoholism:

Age 6–18 years

- No history of PPSV23: 1 dose PPSV23 (at least 8 weeks after any prior PCV13 dose)

**Incomplete series* = Not having received all doses in either the recommended series or an age-appropriate catch-up series. See Tables 8, 9, and 11 in the ACIP pneumococcal vaccine recommendations (www.cdc.gov/mmwr/pdf/rr/rr5911.pdf) for complete schedule details.

Poliovirus vaccination (minimum age: 6 weeks)

Routine vaccination

- 2, 4, 6–18か月、4–6歳の4回投与シリーズ。4歳以降および前回の投与から少なくとも6か月後に最終投与を行います。
- IPVを含む混合ワクチンを使用する場合、4歳までに4回以上のIPVを投与できます。ただし、4歳以降、および前回の投与から少なくとも6か月後の投与が推奨されます。

Catch-up vaccination

- 生後6か月間は、ポリオ流行地域への旅行または発生時のみ、最低年齢と間隔の基準を使用してください。
- IPVは、18歳以上の米国居住者には日常的に推奨されません

Series containing oral polio vaccine (OPV), either mixed OPV-IPV or OPV-only series:

- Total number of doses needed to complete the series is the same as that recommended for the U.S. IPV schedule. See www.cdc.gov/mmwr/volumes/66/wr/mm6601a6.htm?s_cid=mm6601a6_w.
- Only trivalent OPV (tOPV) counts toward the U.S. vaccination requirements.
 - Doses of OPV administered before April 1, 2016, should be counted (unless specifically noted as administered during a campaign).
 - Doses of OPV administered on or after April 1, 2016, should not be counted.
 - For guidance to assess doses documented as “OPV,” see www.cdc.gov/mmwr/volumes/66/wr/mm6606a7.htm?s_cid=mm6606a7_w.
- For other catch-up guidance, see Table 2.

Rotavirus vaccination (minimum age: 6 weeks)

Routine vaccination

- ロタリックス：2ヶ月および4ヶ月の2回接種シリーズ
- RotaTeq：2、4、および6か月の3回投与シリーズ
- yシリーズのいずれかの用量がRotaTeqまたは不明の場合は3用量シリーズとす。

Catch-up vaccination

- 15週、0日以降にシリーズを開始しないでください。
- 最終投与の最大年齢は8か月、0日です。
- 表2を参照してください。

Tetanus, diphtheria, and pertussis (Tdap) vaccination

(minimum age: 11 years for routine vaccination, 7 years for catch-up vaccination)

Routine vaccination

- Adolescents age 11–12 years:** 1 dose Tdap
- Pregnancy:** 1 dose Tdap during each pregnancy, preferably in early part of gestational weeks 27–36
- Tdap may be administered regardless of the interval since the last tetanus- and diphtheria-toxoid-containing vaccine.

Catch-up vaccination

- Adolescents age 13–18 years who have not received Tdap:** 1 dose Tdap, then Td or Tdap booster every 10 years
- Persons age 7–18 years not fully vaccinated* with DTaP:** 1 dose Tdap as part of the catch-up series (preferably the first dose); if additional doses are needed, use Td or Tdap.
- Tdap administered at age 7–10 years:**
 - Children age 7–9 years** who receive Tdap should receive the routine Tdap dose at age 11–12 years.
 - Children age 10 years** who receive Tdap do not need the routine Tdap dose at age 11–12 years.
- DTaP inadvertently administered on or after age 7 years:**
 - Children age 7–9 years:** DTaP may count as part of catch-up series. Administer routine Tdap dose at age 11–12 years.
 - Children age 10–18 years:** Count dose of DTaP as the adolescent Tdap booster.
- For other catch-up guidance, see Table 2.

Special situations

- Wound management** in persons age 7 years or older with history of 3 or more doses of tetanus-toxoid-containing vaccine: For clean and minor wounds, administer Tdap or Td if more than 10 years since last dose of tetanus-toxoid-containing vaccine; for all other wounds, administer Tdap or Td if more than 5 years since last dose of tetanus-toxoid-containing vaccine. Tdap is preferred for persons age 11 years or older who have not previously received Tdap or whose Tdap history is unknown. If a tetanus-toxoid-containing vaccine is indicated for a pregnant adolescent, use Tdap.
- For detailed information, see www.cdc.gov/mmwr/volumes/69/wr/mm6903a5.htm.

**Fully vaccinated* = 5 valid doses of DTaP OR 4 valid doses of DTaP if dose 4 was administered at age 4 years or older

Varicella vaccination (minimum age: 12 months)

Routine vaccination

y 12～15か月、4～6年の2回投与シリーズ
y 用量2は、用量1の3か月後に投与することができます（4週間の間隔の後に投与した用量を数えることができます）

Catch-up vaccination

- 免疫の証拠がない7～18歳の人に2用量シリーズ：

- 7～12歳：通常の間隔：3か月（4週間の間隔の後に投与された用量がカウントされる場合があります）
- 13歳以上：通常の間隔：4～8週間（最小間隔：4週間）
- MMRVの最大使用年齢は12歳です。