Table 12	2.2: Quick guide	to catch-up	immunisati	ons			
Age	Vaccine Most = 0.5ml Route	Minimum dosing intervals have been used					
		Initial T=0	+ 1 month	+ 2 months	+ 4 months	Subsequent	Notes
All	DT (P) containing IM			Can be given at 2m instead if hepatitis B not required		See note	Age < 4 years – 3 doses then $4^{th}$ dose at 18 months or 6 months after primary course and $5^{th}$ dose at 4 years. If the $4^{th}$ dose is given after the child is 3.5 years the $5^{th}$ dose is not required. Usually given as combination vaccine,* if using hexavalent vaccine with hepatitis B, dosing interval = 2 months between dose 2 and 3, and 4 months between dose 1 and 3. Age 4-9 years – 3 doses for primary series then $4^{th}$ dose 6 months after primary course, usually given as combination vaccine* as above. Age 10 years and older – dTPa then dT, dT, then booster dTpa after 10 years.
All	IPV IM or SC			As above			4th dose required at 4 years if aged <4 years for primary course. SC if given as IPV only, IM in combination vaccines. Hexavalent dosing as above.
All	Hepatitis B IM						Age 11–15 years – can be given as alternate 2-dose schedule (adult dose), with 4-month interval. Paediatric dose 0.5ml (0 – 19 years), adult dose 1ml (20 years and older).
Born >1966	MMR IM MMR-V SC						Now available as MMR-V for age <14 years, see below.
All	Varicella SC						<14 years one dose, now available as MMR-V, see below.  Age 14 years and older, born after 1992 – 2 doses (check serology first if no history infection).
Born >1987	MenC IM	If using MenC		If using MenC/Hib			Age <10 years, see below.
<5 years	Hib IM						Only <5 years, dosing varies, 2–11 months: 2 or 3 doses then booster, 1–5 years: 1 dose then booster, interval varies. Hexavalent dosing as above. Children <10 years get extra doses due to combination vaccines (see below).
<5 years	13vPCV IM						Only <5 years unless medical risk factors. Dosing varies, <7 months 3 doses, 7–11 months 2 doses, 1–5 years 1 dose.
Born >1981F >1999M	HPV IM					+ 4 months after dose 2	Age 12–15 years, born after 1981 (females) and after 1999 (males), complete dosing within 12 months.
	Combination vaccines* – use where possible.  Hexavalent vaccine – DTP-IPV-Hib-Hep B – age <10 years (IM).  DTPa-IPV (IM) – age <10 years, also dTpa-IPV (IM) age 10 years and older.  MMR-V – age <14 years, not used as first dose MMR age <4 years (SC).  MenC-Hib – age <10 years, if possible, not with hexavalent vaccines, OK with DTP-IPV, HBV instead (IM). MenC instead is likely to be more convenient and reduce catch-up visits.						Other notes  Offshore entrants may have MMR, +/- OPV & YF, Syrian cohorts may have had additional DT containing vaccines – wait 1 month before other vaccines.  Do not give TST within 4 weeks of LVV (including DHC vaccines).  Rotavirus not usually catch-up – has to be given before 13–15 weeks.  Consider BCG in age <16 years if not given previously – needs negative TST first.  All 0.5ml dose except adult HBV vaccine, also used for adolescent catch-up.