### ATTACHMENT A

### SCHEDULE OF DOCUMENTS - FOI 3079

Doc No.	Date	Description	Decision on access <sup>1</sup>
1	1996, 1998, 2000	National Immunisation Program in 1996, 1998 and 2000 for children	R
2	2000	National Immunisation program from 1 May 2000	R
3	2005	National Immunisation Program from 1 November 2005	R
4	2007	National Immunisation Program from 1 July 2007	R
5	2012	National Immunisation Program from May 2012	R
6	2013	National Immunisation Program from 1 February 2013 to 30 June 2013	R
7	2013	National Immunisation Program from 1 July 2013	R
8	2015	National Immunisation Program for children October 2015	R
9	2016	National Immunisation Program from February 2016	R
10	2016	National Immunisation Program from November 2016	R
11	2018	National Immunisation Program from 1 July 2018	R
12	2019	National Immunisation Program from 1 April 2019	R
13	2020	National Immunisation Program from 1 July 2020	R

<sup>1</sup> R = Release.

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### **1996 ASVS**

### Children born before 1 January 1995

Age due	Antigens required	Dose
	Diphtheria, tetanus, pertussis	1
2 months	Poliomyelitis	1
	НІВ	1
	Diphtheria, tetanus, pertussis	2
4 months	Poliomyelitis	2
	нів	2
	Diphtheria, tetanus, pertussis	3
6 months	Poliomyelitis	3
	HIB (HbOC path only)	3
12 months	Measles, mumps, rubella	1
12 months	HIB (PRP OMP path only)	3
HAI	Diphtheria, tetanus, pertussis HIB (HbOC path only)	4
18 months	HIB (HbOC path only)	4
CUT MEDE	Diphtheria, tetanus, pertussis	5
4 – 5 year (prior to school entry)	Poliomyelitis	4
Note:	J	<u></u>

- HbOC is HibTITER and is given at 2, 4, 6 and 18 months
- PRP-OMP is PedvaxHIB and is given at 2, 4 and 12 months
- Vaccinations administered prior to 01 January 1996 are not recorded on the ACIR.

### 1998 amendment to the 1996 ASVS

The 1998 amendment to the 1996 ASVS includes the addition of MMR vaccine at 4 years of age.

<b>Children born</b>	from 1	January	1995 to	30 April	2000
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Age due	Antigens required	Dose
	Diphtheria, tetanus, pertussis	1
2 months	Poliomyelitis	1
	НІВ	1
	Diphtheria, tetanus, pertussis	2
4 months	Poliomyelitis	2
	HIB (HbOC path only)	2
	Diphtheria, tetanus, pertussis Poliomyelitis HIB (HbOC path only) Diphtheria, tetanus, pertussis Poliomyelitis HIB (HbOC path only) Measles, mumps, rubella	3
6 months	Poliomyelitis	3
	HIB (HbOC path only)	3
12 months	Measles, mumps, rubella HIB (PRP-OMP path only)	1
	HIB (PRP-OMP path only)	3
18 months	Diphtheria, tetanús, pertussis	4
18 months	HIB (HOOC path only)	4
	Diphtheria, tetanus, pertussis	5
4 years	Poliomyelitis	4
~~	Measles, mumps, rubella	2

Note:

- HbOC is HibTITER and is given at 2, 4, 6 and 18 months
- PRP-OMP is PedvaxHIB and is given at 2, 4 and 12 months
- Vaccinations administered prior to 01/01/96 are not recorded on the ACIR.

### 2000 ASVS

The change to the 2000 ASVS includes the addition of hepatitis B (birth dose and combination vaccines). Meningococcal C vaccine was also introduced in 2002.

	Antigens required	Antigens required	
Age due	Vaccine path 1	Vaccine path 2	Dose
	NSW, SA, QLD & NT	VIC , WA & TAS	
Birth	Hepatitis B	Hepatitis B	В
	Diphtheria, tetanus, pertussis and hepatitis B	Diphtheria, tetaous, pertussis	1
2 months	Poliomyelitis	Polionvelitis	1
	НІВ	HIB and hepatitis B	1
	Diphtheria, tetanus, pertussis and hepatitis B	Piphtheria, tetanus, pertussis	2
4 months	Poliomyelitis	Poliomyelitis	2
	HIB	HIB and hepatitis B	2
6 months	Diphtheria, tetanus, pertussis and hepatitis B	Diphtheria, tetanus, pertussis	3
	Poliomyelitis	Poliomyelitis	3
	Measles, mumps, rubella	Measles, mumps, rubella	1
12 months	НІВ	HIB and hepatitis B	3
	*Meningococcal C	*Meningococcal C	1
18 months #	Diphtheria, tetanus, pertussis	Diphtheria, tetanus, pertussis	4
	Diphtheria, tetanus, pertussis	Diphtheria, tetanus, pertussis	5
4 years	Poliomyelitis	Poliomyelitis	4
	Measles, mumps rubella	Measles, mumps, rubella	2

Childron	horn	1 May	2000 +/	. 21	December	2002
Cilluren	DOLL	L May	2000 10	1 2 1	December	2003

\*Meningococcal C is added for children born on or after 1 January 2002.

# On 18 September 2003 the 18 month dose of DTP was removed from the schedule for all children.

### Note:

- The 2000 Australian Standard Vaccination Schedule recommends only one HIB Path (PRP-OMP). •
- When necessary, the two paths may be interchanged with regard to their hepatitis B and HIB components . (eg when a child moves interstate, they may change from one path to the other).
- Hepatitis B dose 3 may be given at 6 or 12 months, depending on the vaccine administered. Hepatitis B dose 3 is not due or overdue if a child has received three valid doses (for example, birth dose, dose one • and dose two).
- Wherever possible, the same brand of DTPa should be used at 2, 4 and 6 months of age. .

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# Australian Standard Vaccination Schedule 2000-2002

immunisation session through the use of new combination vaccines and to limit, as far as the immunisations at 2, 4, 6 and 12 months, two options for the use of combination vaccines possible, the number of vaccine products that a practitioner would need to have available. For recommendations the NHMRC has sought to reduce the number of injections given at each The Australian Standard Vaccination Schedule shown here is that recommended by the National Health and Medical Research Council (NHMRC). In drawing up its which meet these criteria are recommended.

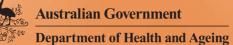
Notes

- a. Hepatitis B vaccine should be given to all infants at birth and should not be delayed beyond 7 days after birth. Infants whose mothers are hepatitis B surface antigen positive (HBsAg+ve) should also be given hepatitis B immunoglobulin (HBIG) within 12 hours of birth
- b. When necessary the two paths may be interchanged with regard to their hepatitis B and Hib components. For example, when a child moves interstate, they may change from one path to the other.
- c. Wherever possible the same brand of DTPa should be used at 2, 4 and 6 months.
- d. Adolescent hepatitis B vaccination is not necessary for those children who have previously received three doses of hepatitis B vaccine.
- e. Td should be given at 50 years of age unless a Td booster dose has been documented in the previous 10 years.

### Transition from the old to the new schedule

All babies born on or after 1 May 2000 should commence the new Australian Standard Vaccination Schedule. Because of logistics, funding and vaccine interchangeability issues, all children born before this date should commence or continue with the previous schedule.

DISEASE	VACCINE	AVAILABLE PRODUCTS
Hepatitis B	hepB	Engerix-B <sup>™</sup> or H-B VaxII <sup>™</sup>
Diphtheria, Tetanus, Pertussis	DTPa PEF P	Infanrix <sup>™</sup> or Tripacel <sup>™</sup>
Diphtheria, Tetanus, Pertussis, Hepatitis B	DTPa-hepB	Infanrix-HepB™
Haemophilus Influenzae type B		PedvaxHIВ <sup>тм</sup>
Haemophilus Influenzae type B, Hepatitis B	Hib (PRP-QMP)-hepB	Comvax <sup>TM</sup>
Poliomyelitis	OPX	Polio Sabin™
Measles, Mumps, 👋 Rubella	MMR	MMRII <sup>®</sup> or Priorix <sup>TM</sup>
Diphtheria, Tetanus	Td	ADT Vaccine <sup>™</sup>
Pneumococcal disease	Pneumococcal vaccine	Pneumovax23 <sup>®</sup>
Influenza	Influenza vaccine	Fluarix™ or Fluvax <sup>®</sup> or Vaxigrip™ or Flurivin™



### (VALID FROM 1 NOVEMBER 2005)

Age	Vaccine
Birth	• Hepatitis B (hepB) <sup>a</sup>
2 months	<ul> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li><i>Haemophilus influenzae type b (Hib)</i> c.d</li> <li>Inactivated poliomyelitis (IPV)</li> <li>Pneumococcal conjugate (7vPCV)</li> </ul>
4 months	<ul> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li>Haemophilus influenzae type b (Hib) <sup>c,d</sup></li> <li>Inactivated poliomyelitis (IPV)</li> <li>Pneumococcal conjugate (7vPCV)</li> </ul>
6 months	<ul> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li><i>Haemophilus influenzae type b (Hib)</i></li> <li>Inactivated poliomyelitis (IPV)</li> <li>Pneumococcal conjugate (7vPCV) <sup>e</sup></li> </ul>
12 months	<ul> <li>Hepatitis B (hepB)<sup>b</sup></li> <li>Haemophilus influenzae type b (Hib)<sup>d</sup></li> <li>Measles, mumps and rubella (MMR)</li> <li>Meningococcal C (MenCCV)</li> </ul>
12-24 months	<ul> <li>Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas)<sup>4</sup></li> </ul>
18 months	<ul> <li>Varicella (VZV)</li> </ul>
18-24 months	<ul> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander children in high risk areas) g</li> <li>Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas)</li> </ul>
4 years	<ul> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li>Measles, mumps and rubella (MMR)</li> <li>Inactivated poliomyelitis (IPV)</li> </ul>
10-13 years <sup>h</sup>	<ul><li>Hepatitis B</li><li>Varicella (VZV)</li></ul>
15-17 years i	• Diphtheria, tetanus and acellular pertussis (dTpa)
15-49 years	<ul> <li>Influenza (Aboriginal and Torres Strait Islander people medically at-risk)</li> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people medically at-risk)</li> </ul>
50 years and over	<ul> <li>Influenza (Aboriginal and Torres Strait Islander people)</li> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people)</li> </ul>
65 years and over	<ul><li>Influenza</li><li>Pneumococcal polysaccharide (23vPPV)</li></ul>

\* Please refer to reverse for footnotes

### Footnotes to National Immunisation Program Schedule

- **a** Hepatitis B vaccine should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- **b** Total of three doses of hepB required following the birth dose, at either 2m, 4m and 6m or at 2m, 4m and 12m.
- c Give a total of 4 doses of Hib vaccine (2m, 4m, 6m and 12m) if using PRP-T Hib containing vaccines.
- **d** Use PRP-OMP Hib containing vaccines in Aboriginal and Torres Strait Islander children in areas of higher risk (Queensland, Northern Territory, Western Australia and South Australia) with a dose at 2m, 4m and 12m.
- e Medical at-risk children require a fourth dose of 7vPCV at 12 months of age, and a booster dose of 23vPPV at 4 years of age.
- f Two doses of hepatitis A vaccine are required for Aboriginal and Torres Strait Islander children living in areas of higher risk (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details
- g Contact your State or Territory Health Department for details.
- h These vaccines are for one cohort only within this age range, and should only be given if there is no prior history of disease or vaccination. Dose schedules may vary between jurisdictions. Contact your State or Territory Health Department for details.
- i This vaccine is for one cohort only within this age range. Contact your State or Territory Health Department for details.

### Further information

Please refer to the *Australian Immunisation Handbook 8th Edition*, available at **www1.health.gov.au/immhandbook**; for detailed information on vaccine scheduling and administration. Further information and immunisation resources are available from the Immunise Australia Program website at **www.immunise.health.gov.au** or by contacting the infoline on **1800 671 811**.

You should contact your State or Territory health department for further information on the program specific to your State or Territory:

### State/Territory

### **Contact Number**

Australian Capital Territory	02 6205 2300
New South Wales	Public Health Unit (look under 'Health' in the White Pages)
Northern Territory	08 8922 8044
Queensland	07 3234 1500
South Australia	08 8226 7177
Tasmania	1800 671 738 (Tasmania only)
Victoria	1300 882 008
Western Australia	08 9321 1312

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AUSTRALIA PROGRAM

An Australian, State and Territory Governn**2eof**:2initiative

DOCUMENT 3



(VALID FROM 1 JULY 2007)

Age	Vaccine
Birth	Hepatitis B (hepB) <sup>a</sup>
2 months	<ul> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> </ul>
	• Haemophilus influenzae type b (Hib) <sup>c,d</sup>
	<ul> <li>Inactivated poliomyelitis (IPV)</li> </ul>
	<ul> <li>Pneumococcal conjugate (7vPCV)</li> </ul>
	Rotavirus
4 months	• Hepatitis B (hepB) <sup>b</sup>
	<ul> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li>Haemonhilus influenzae type h (Hib) <sup>c,d</sup></li> </ul>
	<ul> <li>Haemophilus influenzae type b (Hib) <sup>c,d</sup></li> <li>Inactivated poliomyelitis (IPV)</li> </ul>
	Inactivated poliomyelitis (IPV)     Pneumococcal conjugate (7vPCV)     Determiner
	<ul> <li>Rotavirus</li> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> <li>Haemophilus influenzae type b (Hib) <sup>c,d</sup></li> <li>Inactivated poliomyelitis (IPV)</li> <li>Pneumococcal conjugate (7vPCV)</li> <li>Rotavirus</li> <li>Honettike B (hepB) <sup>b</sup></li> </ul>
6 months	Hepatitis B (hepB) <sup>b</sup>
	<ul> <li>Diphtheria, tetanus and acellular pertussis (DTPa)</li> </ul>
	• Haemophilus influenzae type b (Hib) 🛇
	Inactivated poliomyelitis (IPV)
	Pneumococcal conjugate (7vPCV)
	Rotavirus
12 months	<ul> <li>Hepatitis B (hepB) <sup>b</sup></li> <li>Haemophilus influenzae type b (Hib) <sup>d</sup></li> </ul>
	Measles, mumps and rubella (MMR)
	Meningococcal C (MenCCV)
12-24 months	Hepatitis A (Aboriginal and Torres Strait Islander children in
	high risk areas) <sup>r</sup>
18 months	Varicella (VZV)
18-24 months	Pneumococcal polysaccharide (23vPPV) (Aboriginal and
	Torres Strait Islander children in high risk areas) 🛚
	Hepatitis A (Aboriginal and Torres Strait Islander children in high risk
	areas)
4 years	Diphtheria, tetanus and acellular pertussis (DTPa)
	<ul> <li>Measles, mumps and rubella (MMR)</li> <li>Inactivated polyomyelitis (IPV)</li> </ul>
to to voors h	Inactivated poliomyelitis (IPV)     Hepatitis B (hepB)
10-13 years <sup>h</sup>	• Varicella (VZV)
12-13 years <sup>i</sup>	Human Papillomavirus (HPV)
15-17 years <sup>i</sup>	• Diphtheria, tetanus and acellular pertussis (dTpa)
15-49 years	• Influenza (Aboriginal and Torres Strait Islander people medically at-risk)
-5 -7 ,	Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait
	Islander people medically at-risk)
50 years and	Influenza (Aboriginal and Torres Strait Islander people)
over	<ul> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and</li> </ul>
	Torres Strait Islander people)
65 years and	Influenza
over	Pneumococcal polysaccharide (23vPPV)

\* Please refer to reverse for footnotes

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### Footnotes to National Immunisation Program Schedule

- Hepatitis B vaccine should be given to all infants as soon as practicable after birth. The greatest а benefit is if given within 24 hours, and must be given within 7 days.
- b Total of three doses of hepB required following the birth dose, at either 2m, 4m and 6m or at 2m, 4m and 12m.
- Give a total of 4 doses of Hib vaccine (2m, 4m, 6m and 12m) if using PRP-T Hib containing vaccines. С
- Ь Use PRP-OMP Hib containing vaccines in Aboriginal and Torres Strait Islander children in areas of higher risk (Queensland, Northern Territory, Western Australia and South Australia) with a dose at 2m, 4m and 12m.
- Medical at-risk children require a fourth dose of 7vPCV at 12 months of age, and a booster dose of 23vPPV at 4 years of age.
- Two doses of hepatitis A vaccine are required for Aboriginal and Torres Strait Islander children living f in areas of higher risk (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details. 06
- g Contact your State or Territory Health Department for details.
- These vaccines are for one cohort only within this age range, and should only be given if there is no h prior history of disease or vaccination. Dose schedules may vary between jurisdictions. Contact your State or Territory Health Department for details.
- i This vaccine is for one cohort only within this age range. Contact your State or Territory Health Department for details.
- Third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health i department for details

### **Further information**

Further information and immunisation resources are available from the Immunise Australia Program website at www.immunise.health.gov.au or by contacting the infoline on 1800 671 811.

You should contact your State or Territory health department for further information on the program specific to your State or Territory:

State/Territory	Contact Number
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New South Wales	Public Health Unit (look under 'Health' in the White Pages)
Northern Territory	08 8922 8044
Queensland	07 3234 1500
South Australia	08 8226 7177
Tasmania	03 6222 7724 or 1800 671 738
Victoria	1300 882 008
Western Australia	08 9321 1312



A joint Australian, State and Territory Government initiative

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### NATIONAL IMMUNISATION PROGRAM SCHEDULE As at May 2012

### **Child programs**

### Birth

• Hepatitis B (hepB) [See footnote a]

### 2 months

- Hepatitis B (hepB) •
- Diphtheria, tetanus and whooping cough (acellular pertussis) (DTPa) •
- *Haemophilus influenzae* type b (Hib)
- Polio (inactivated poliomyelitis IPV)
- Pneumococcal conjugate (13vPCV)
- Rotavirus

### 4 months

- Hepatitis B (hepB)
- 2FHFASHAGAT • Diphtheria, tetanus and whooping cough (acellular pertussis (DTPa)
- *Haemophilus influenzae* type b (Hib)
- Polio (inactivated poliomyelitis IPV)
- Pneumococcal conjugate (13vPCV) •
- Rotavirus

### 6 months

- Hepatitis B (hepB) •
- Diphtheria, tetanus and whooping cough (acellular pertussis (DTPa)
- Haemophilus influenzae type b (Hib)
  Polio (inactivated poliomyelitis) (IPV)
- Pneumococcal conjugate (13vPCV)
- Rotavirus [See <u>footnote b</u>]

### 12 months

- Haemophilus influenzae type b (Hib) •
- Measles, mumps and rubella (MMR)
- Meningococcal C (MenCCV)

### 18 months

• Chickenpox (varicella) (VZV)

### 4 vears

- Diphtheria, tetanus and whooping cough (acellular pertussis) (DTPa)
- Polio (inactivated poliomyelitis) (IPV)
- Measles, mumps and rubella (MMR)

### **School programs**

### **10-13 years**

- Hepatitis B [See <u>footnote c</u>]
- Chickenpox (varicella) (VZV) [See <u>footnote d</u>]

### 12-13 years

• Human Papillomavirus (HPV) [See <u>footnotes e</u>]

### 10-17 years

• Diphtheria, tetanus and whooping cough (acellular pertussis) (dTPa)

### **Immunisation for special groups**

### 6 months and over – at risk individuals

• Influenza (people with medical conditions placing them at risk of serious complications of influenza)

### 12 months – at risk individuals

- Pneumococcal conjugate (13vPCV) [See tootnote f and g]
- Hepatitis B (hepB) [See <u>footnote h]</u>

### 12-24 months

- Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas) [See <u>footnote i</u>]
- Pneumococcal (23vPPV) (18 24 months) or Pneumococcal (13vPCV) (12 18 months from 1 October 2012) (Aboriginal and Torres Strait Islander children in high risk areas) [See footnote j]
- Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas)

### 4 years - at risk individuals

• Pneumococcal polysaccharide (23PPV) [See <u>footnote f</u>]

### 15 years and over

- Influenza (Aboriginal and Torres Strait Islander people)
- Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people medically at risk)

### 50 years and over

• Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people)

### **Pregnant Women**

• Influenza (flu)

### 65 years and over

- Influenza (flu)
- Pneumococcal polysaccharide (23vPPV)

### Footnotes to the National Immunisation Program (NIP) Schedule

- a) Hepatitis B vaccine should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- b) Third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health department for details.
- c) Contact your State or Territory Health Department for details.
- d) These vaccines are for one cohort only within this age range, and should only be given if there is no prior history of disease or vaccination. Dose schedules may vary between jurisdictions.
- e) This vaccine is for one cohort only within this age range. Contact your State or Territory Health Department for details.
- f) Medical at-risk children require a fourth dose of 13vPCV at 12 months of age, and a booster dose of 23vPPV at 4 years of age.
- Pneumococcal vaccination at 12 months for at risk individuals is for those children born less g) than 28 weeks gestation.
- h) Hepatitis B vaccination at 12 months of age is for children born less than 32 weeks gestation or weigh less 2000 grams at birth.
- e and en Territor in Department in details. Two doses of hepatitis A vaccine are required for Aboriginal and Torres Strait Islander i) children living in areas of high risk (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.
- South Australia). Contact your State of Fernery Territory Health Department for details. j)

FOI 3079

ustralian Government

**Department of Health and Ageing** 

### National Immunisation Program Schedule From 1 February 2013 to 30 June 2013

Child programs	
Age	
Birth	• Hepatitis B (hepB) <sup>a</sup>
2 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>
4 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), Haemophilus influenzae type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>
6 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping.cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus <sup>b</sup></li> <li><i>Haemophilus influenzae</i> type b (Hib)</li> <li>Meningococcal C (MenCCV)</li> <li>Measles, mumps and rubella (MMR)</li> <li>Varicella (chickenpox)</li> <li>Diphtheria, tetanus, acellular pertussis (whooping cough) and inactivated poliomyelitis (polio) (DTPa-IPV)</li> </ul>
12 months	Hoannas     Haemophilus influenzae type b (Hib)     Meningococcal C (MenCCV)     Measles, mumps and rubella (MMR)     Varicella (chickenpox)
18 months	Varicella (chickenpox)
4 years	<ul> <li>Diphtheria, tetanus, acellular percussis (whooping cough) and inactivated poliomyelitis (polio) (DTPa-IPV)</li> <li>Measles, mumps and rubella (MMR)</li> </ul>
School programs	
<b>10–15 years</b> (contact your State or Territory Health Department for details)	<ul> <li>Hepatitis B (hepB)</li> <li>Varicella (chickenpox)</li> <li>Human papillomavirus (HPV) <sup>d</sup></li> <li>Diphtheria, tetanus and acellular pertussis (whooping cough) (dTpa)</li> </ul>
At-risk groups	
6 months and over	<ul> <li>Influenza (flu) (people with medical conditions placing them at risk of serious complications of influenza)</li> </ul>
12 months	• Pneumococcal conjugate (13vPCV) <sup>e</sup> (medically at risk)
12–18 months	$\bullet$ Pneumococcal conjugate (13vPCV) (Aboriginal and Torres Strait Islander children in high risk areas) $^{\rm e}$
12–24 months	$\bullet$ Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas) $^{\rm f}$
4 years	• Pneumococcal polysaccharide (23vPPV) <sup>e</sup> (medically at risk)
15 years and over	<ul> <li>Influenza (flu) (Aboriginal and Torres Strait Islander people)</li> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people medically at risk)</li> </ul>
50 years and over	• Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people)
Pregnant women	• Influenza (flu)
65 years and over	<ul> <li>Influenza (flu)</li> <li>Pneumococcal polysaccharide (23vPPV)</li> </ul>

\* Please refer to reverse for footnotes

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### Footnotes to the National Immunisation Program (NIP) Schedule

- a. Hepatitis B vaccine: should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- b. Rotavirus vaccine: third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health Department for details.
- c. Hepatitis B and Varicella vaccine: contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- d. HPV vaccine: is for all adolescents aged between 12 and 13 years. A catch-up program for males aged between 14 and 15 years is available until December 2014. Contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- e. Pneumococcal vaccine:
  - i. Medically at risk children require: a fourth dose of 13vPCV at 12 months of age; and a booster dose of 23vPPV at 4 years of age (but less than 6 years of age)
  - ii. Infants born at less than 28 weeks gestation require: a fourth dose of 13vPCV at 12 months of age.
  - iii. Aboriginal and Torres Strait Islander children require: a fourth dose of pneumococcal vaccine (13vPCV) at 12 months of age (but not more than 18 months) for children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.
- f. Hepatitis A vaccine: two doses of Hepatitis A vaccine for Aboriginal and Torres Strait Islander children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.

### **Further information**

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You should contact your State or Territory Health Department for further information on the program specific to your State or Territory:

State/Territory		Contact Number
Australian Capital Te	erritory	(02) 6205 2300
New South Wales		1300 066 055
Northern Territory		(08) 8922 8044
Queensland		13 HEALTH (13 4325 84)
South Australia		1300 232 272
Tasmania		1800 671 738
Victoria		1300 882 008
Western Australia		(08) 9321 1312



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**DOCUMENT 6** 



Australian Government

**Department of Health** 

### National Immunisation Program Schedule From 1 July 2013

Child programs	
Age	Vaccine
Birth	• Hepatitis B (hepB) ª
2 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>
4 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), Haemophilus influenzae type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>
6 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping.cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus <sup>b</sup></li> </ul>
12 months	Haemophilus influenzae type b and Meningococcal C (Hib-MenC)     Measles, mumps and rubella (MMR)
18 months	<ul> <li>Measles, mumps, rubella and varicella (chickenpox) (MMRV)</li> </ul>
4 years	<ul> <li>Diphtheria, tetanus, acellular pertussis (whooping cough) and inactivated poliomyelitis (polio) (DTPa-IPV)</li> <li>Measles, mumps and rubella (MMR) (to be given only if MMRV vaccine was not given at 18 months)</li> </ul>
School programs	
<b>10–15 years</b> (contact your State or Territory Health Department for details)	<ul> <li>Hepatitis B (hepB)</li> <li>Varicella (chickenpox)</li> <li>Human papillomavirus (HPV) <sup>d</sup></li> <li>Diphtheria, tetanus and acellular pertussis (whooping cough) (dTpa)</li> </ul>
At-risk groups	
6 months and over	<ul> <li>Influenza (flu) (people with medical conditions placing them at risk of serious complications of influenza)</li> </ul>
12 months	• Pneumococcal conjugate (13vPCV) <sup>e</sup> (medically at risk)
12–18 months	Pneumococcal conjugate (13vPCV) (Aboriginal and Torres Strait Islander children in high risk areas) $^{\rm e}$
12–24 months	• Hepatitis A (Aboriginal and Torres Strait Islander children in high risk areas) <sup>f</sup>
4 years	• Pneumococcal polysaccharide (23vPPV) <sup>e</sup> (medically at risk)
15 years and over	<ul> <li>Influenza (flu) (Aboriginal and Torres Strait Islander people)</li> <li>Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people medically at risk)</li> </ul>
50 years and over	• Pneumococcal polysaccharide (23vPPV) (Aboriginal and Torres Strait Islander people)
Pregnant women	• Influenza (flu)
65 years and over	Influenza (flu)     Pneumococcal polysaccharide (23vPPV)

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### Footnotes to the National Immunisation Program (NIP) Schedule

- a. Hepatitis B vaccine: should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- b. Rotavirus vaccine: third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health Department for details.
- c. Hepatitis B and Varicella vaccine: contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- d. HPV vaccine: is for all adolescents aged between 12 and 13 years. A catch-up program for males aged between 14 and 15 years is available until December 2014. Contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- e. Pneumococcal vaccine:
  - i. Medically at risk children require: a fourth dose of 13vPCV at 12 months of age; and a booster dose of 23vPPV at 4 years of age.
  - ii. Aboriginal and Torres Strait Islander children require: a fourth dose of pneumococcal vaccine (13vPCV) at 12-18 months of age for children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.
- f. Hepatitis A vaccine: two doses of Hepatitis A vaccine for Aboriginal and Torres Strait Islander children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.

### **Further information**

Further information and immunisation resources are available from the Immunise Australia Program website at **www.immunise.health.gov.au** or by contacting the infoline on **1800 671 811**.

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### State/Territory

### **Contact Number**

Australian Capital Territory	(02) 6205 2300
New South Wales	1300 066 055
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Western Australia	(08) 9321 1312



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(As at October 2015)

## Immunisation Schedule (0-4 years)

Age	Disease immunised against
Birth	Hepatitis B
<b>2</b> months can be given at 6 weeks of age	<ul> <li>Hepatitis B, Diphtheria-Tetanus-Whooping Cough, <i>Haemophilus Influenzae</i> type b, Polio</li> <li>Pneumococcal conjugate</li> <li>Rotavirus</li> </ul>
<b>4</b> months	<ul> <li>Hepatitis B, Diphtheria-Tetanus-Whooping Cough, <i>Haemophilus Influenzae</i> type b, Polio</li> <li>Pneumococcal conjugate</li> <li>Rotavirus</li> </ul>
<b>6</b> months	<ul> <li>Hepatitis B, Diphtheria-Tetanus-Whooping Cough, <i>Haemophilus Influenzae</i> type b, Polio</li> <li>Pneumococcal conjugate</li> <li>Rotavirus**</li> </ul>
12 months	<ul> <li>Haemophilus Influenzae type b, Meningococcal C</li> <li>Measles, Mumps, Rubella</li> </ul>
	• Manalas Mumps Puballa Varicalla (chickoppox)

<b>18</b> months	<ul> <li>Measles, Mumps, Rubella, Varicella (chickenpox)</li> <li>Diphtheria-Tetanus-Whooping Cough</li> </ul>
<b>4</b> years	<ul> <li>Diphtheria-Tetanus-Whooping Cough and Polio</li> <li>(Measles, Mumps, Rubella<sup>***</sup>)</li> </ul>

# For more information about immunisation visit **immunise.health.gov.au** or call the Immunise Australia Information Line on **1800 671 811**.

**Note:** Influenza vaccine is available to at risk groups. Additional vaccines are funded for Aboriginal and Torres Strait Islander children in NT, WA, SA and QLD.

\*\* 3rd dose of vaccine dependent on vaccine brand used.

\*\*\* to be given only if MMRV vaccine was not given at 18 months.

 $\ensuremath{\mathbb C}$  2013 Commonwealth of Australia as represented by the Department of Health.

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### Australian Government

**Department of Health** 

**DOCUMENT 8** 



Australian Government

**Department of Health** 

### National Immunisation Program Schedule From February 2016

Child programs		
Age	Vaccine	
Birth	• Hepatitis B (hepB)ª	
2 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>	
4 months	Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)     Pneumococcal conjugate (13vPCV)     Rotavirus	
6 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB, DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus<sup>o</sup></li> </ul>	
12 months	Haemophilus influenzae type b and meningococca(C (Hib-MenC)     Measles, mumps and rubella (MMR)	
18 months	Diptheria, tetanus, pertussis (whooping cough) (DTPa)     Measles, mumps, rubella and varicella (chickenpox) (MMRV)	
4 years	<ul> <li>Diphtheria, tetanus, acellular, pertussis (whooping cough) and inactivated poliomyelitis (polio) (DTPa-IEV)</li> <li>Measles, mumps and rubella (MMR) (to be given only if MMRV vaccine was not given at 18 months)</li> </ul>	
School programs		
<b>10–15 years</b> (contact your State or Territory Health Department for details)	<ul> <li>Varicella (chickenpox)<sup>c</sup></li> <li>Human papillomavirus (HPV)<sup>d</sup></li> <li>Diphtheria, tetanus and acellular pertussis (whooping cough) (dTpa)</li> </ul>	
At-risk groups	A HAVE A STATE OF	
Aboriginal and Torres Strait Isla	nders	
12–18 months (in high risk areas) <sup>e</sup>	Pneumococcal conjugate (13vPCV)	
12–24 months (in high risk areas) <sup>f</sup>	• Hepatitis A	
6 months to less than 5 years	• Influenza (flu)	
15 years and over	Influenza (flu)     Pneumococcal polysaccharide (23vPPV) (medically at risk)	
50 years and over	Pneumococcal polysaccharide (23vPPV)	
Other at-risk groups		
6 months and over (people with medical conditions placing them at risk of serious complications of influenza)	• Influenza (flu)	
12 months (medically at risk) <sup>e</sup>	Pneumococcal conjugate (13vPCV)	
4 years (medically at risk) <sup>e</sup>	Pneumococcal polysaccharide (23vPPV)	
<b>Pregnant women</b> (at any stage of pregnancy)	• Influenza (flu)	
65 years and over	Influenza (flu)     Pneumococcal polysaccharide (23vPPV)	

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### Footnotes to the National Immunisation Program (NIP) Schedule

- a. Hepatitis B vaccine: should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- b. Rotavirus vaccine: third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health Department for details.
- c. Varicella vaccine: contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- d. HPV vaccine: is for all adolescents aged between 12 and 13 years. Contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- e. Pneumococcal vaccine:
  - i. Medically at risk children require a fourth dose of 13vPCV at 12 months of age and a booster dose of 23vPPV at 4 years of age.
  - ii. Aboriginal and Torres Strait Islander children require a fourth dose of pneumococcal vaccine (13vPCV) at 12-18 months of age for children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.
- f. Hepatitis A vaccine: two doses of Hepatitis A vaccine for Aboriginal and Torres Strait Islander children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.

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All information in this publication is correct as at February 2016

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### **Department of Health**

### **National Immunisation Program Schedule**

From November 2016

Child programs			
Age	Vaccine		
Birth	• Hepatitis B (hepB) <sup>a</sup>		
2 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus</li> </ul>		
4 months	Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus</i> influenzae type b, inactivated poliomyelitis (polio) (hepB-DTPa-Hib-IPV)     Pneumococcal conjugate (13vPCV)     Rotavirus		
6 months	<ul> <li>Hepatitis B, diphtheria, tetanus, acellular pertussis (whooping cough), <i>Haemophilus influenzae</i> type b, inactivated poliomyelitis (polio) (hepB DTPa-Hib-IPV)</li> <li>Pneumococcal conjugate (13vPCV)</li> <li>Rotavirus<sup>b</sup></li> </ul>		
12 months	Haemophilus influenzae type b and meningococcal C (Hity-MenC)     Measles, mumps and rubella (MMR)		
18 months	Diphtheria, tetanus, pertussis (whooping cough) (DTPa)     Measles, mumps, rubella and varicella (chickenpox) (MMRV)		
4 years	Diphtheria, tetanus, acellular pertussis (whooping cough) and inactivated poliomyelitis (polio) (DTPa1PV)		
School programs	A THE ARE		
<b>10–15 years</b> (contact your State or Territory Health Department for details)	<ul> <li>Varicella (chickenpox)</li> <li>Human papillomavirus (HPV)</li> <li>Diphtheria, tetanus and acellular pertussis (whooping cough) (dTpa)</li> </ul>		
At-risk groups			
Aboriginal and Torres Strait Isla	nders		
12–18 months (in high risk areas) <sup>e</sup>	Pneumococcal conjugate (13vPCV)		
12–24 months (in high risk areas) <sup>f</sup>	Hepatitis A		
6 months to less than 5 years	• Influenza (flu)		
15 years and over	Influenza (flu)     Pneumococcal polysaccharide (23vPPV) (medically at risk)		
50 years and over	Pneumococcal polysaccharide (23vPPV)		
Other at-risk groups			
6 months and over (people with medical conditions placing them at risk of serious complications of influenza)	• Influenza (flu)		
12 months (medically at risk) <sup>e</sup>	Pneumococcal conjugate (13vPCV)		
<b>4 years</b> (medically at risk) <sup>e</sup>	Pneumococcal polysaccharide (23vPPV)		
<b>Pregnant women</b> (at any stage of pregnancy)	• Influenza (flu)		
65 years and over	Influenza (flu)     Pneumococcal polysaccharide (23vPPV)		
70 years (a free single catch-up dose is available for adults aged 71-79 years until 31 October 2021) * Please refer to reverse for footno	Herpes Zoster (shingles)		

\* Please refer to reverse for footnotes

### Footnotes to the National Immunisation Program (NIP) Schedule

- a. Hepatitis B vaccine: should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- b. Rotavirus vaccine: third dose of vaccine is dependent on vaccine brand used. Contact your State or Territory Health Department for details.
- c. Varicella vaccine: contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- d. HPV vaccine: is for all adolescents aged between 12 and 13 years. Contact your State or Territory Health Department for details on the school grade eligible for vaccination.
- e. Pneumococcal vaccine:
  - i. Medically at risk children require a fourth dose of 13vPCV at 12 months of age and a booster dose of 23vPPV at 4 years of age.
  - ii. Aboriginal and Torres Strait Islander children require a fourth dose of pneumococcal vaccine (13vPCV) at 12-18 months of age for children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.
- f. Hepatitis A vaccine: two doses of Hepatitis A vaccine for Aboriginal and Torres Strait Islander children living in high risk areas (Queensland, Northern Territory, Western Australia and South Australia). Contact your State or Territory Health Department for details.

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### State/Territory

### **Contact Number**

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Western Australia	(08) 9321 1312
South Australia Tasmania Victoria	1300 232 272 1800 671 738 1300 882 008



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All information in this publication is correct as at November 2016

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From 1 July 2018



Age	Disease	Vaccine Brand
	Childhood vaccination (also see influenza vaccine)	
Birth	<ul> <li>Hepatitis B (usually offered in hospital)<sup>a</sup></li> </ul>	H-B-Vax® II Paediatric or Engerix B® Paediatric
<b>2 months</b> Can be given from 6 weeks of age	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> <li>Pneumococcal</li> <li>Rotavirus<sup>b</sup></li> </ul>	Infanrix® hexa Prevenar 13® Rotarix®
4 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> <li>Pneumococcal</li> <li>Rotavirus<sup>b</sup></li> </ul>	Infanrix® hexa Prevenar 13® Rotarix®
6 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> </ul>	Infanrix® hexa
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA) and medically at-risk children <sup>c</sup>	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> <li>Pneumococcal</li> <li>Meningococcal ACWY</li> <li>Moseler mumos rubala</li> </ul>	Prevenar 13®
12 months	<ul> <li>Meningococcal ACWY</li> <li>Measles, mumps, rubella</li> <li>Pneumococcal</li> </ul>	Nimenrix® M-M-R® II or Priorix® Prevenar 13®
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	• Hepatitis A	Vaqta® Paediatric
18 months	<ul> <li>Haemophilus influenzae type b (Hib)</li> <li>Measles, mumps, rubella, varicella (chickenpox)</li> <li>Diphtheria, tetanus, pertussis (whooping cough)</li> </ul>	ActHIB® Priorix-Tetra® or ProQuad® Infanrix® or Tripacel®
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	• Hepatitis A	Vaqta® Paediatric
4 years	Diphtheria, tetanus, pertussis (whooping cough), polio	Infanrix® IPV or Quadracel®
Additional vaccines for medically at-risk children <sup>c</sup>	• Pneumococcal	Pneumovax 23®

### From 1 July 2018



Age	Disease	Vaccine brand	
	Adolescent vaccination (also see influenza vaccine		
<b>10-&lt;15 years</b> (School programs <sup>d</sup> )	<ul> <li>Human papillomavirus (HPV)<sup>e</sup></li> <li>Diphtheria, tetanus, pertussis (whooping cough)</li> </ul>	Gardasil®9 Boostrix®	
	Adult vaccination (also see influenza vaccine)		
<b>15–49 years</b> Aboriginal and Torres Strait Islander people with medical risk factors <sup>c</sup>	• Pneumococcal	Pneumovax 23®	
<b>50 years and over</b> Aboriginal and Torres Strait Islander people	Pneumococcal	Pneumovax 23®	
65 years and over	Pneumococcal	Pneumovax 23®	
<b>70–79</b> years <sup>®</sup>	Shingles (herpes zoster)	Zostavax®	
Pregnant women	<ul> <li>Pertussis (whooping cough)<sup>g</sup></li> <li>Influenza<sup>h</sup></li> </ul>	Boostrix® or Adacel®	
50 years and over Aboriginal and Torres Strait Islander people       • Pneumococcal       Pneumovax 23®         65 years and over       • Pneumococcal       Pneumovax 23®         70–79 years'       • Shingles (herpes zoster)       Zostavax®         Pregnant women       • Pertussis (whooping cough) <sup>9</sup> • Influenza <sup>h</sup> Boostrix® or Adacel®			
Funded annual influenza vaccination <sup>h</sup>			
6 months and over with certain medical risk factors			
Aboriginal and Torres Strait Islander children 6 months to less than 5 years			
Aboriginal and Torres Strait Islander people 15 years and over			
65 years and over			
Pregnant women			

- <sup>a</sup> Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- <sup>b</sup> Rotavirus vaccine: First dose must be given by 14 weeks of age, the second dose by 24 weeks of age.

<sup>c</sup> Refer to the current edition of *The Australian Immunisation Handbook* for all medical risk factors.

<sup>d</sup> Contact your state or territory health service for school grades eligible for vaccination.

e Observe Gardasil®9 dosing schedules by age and at-risk conditions. 2 doses: 9 to <15 years - 6 months mininimum interval. 3 doses: ≥15 years and/or have certain medical conditions - 0, 2 and 6 month schedule. Only 2 doses funded on the NIP unless 12-13 year old has certain medical risk factors.

f All people aged 70 years old, with a five year catch-up program for people aged 71-79 years old until 31 October 2021.

9 Single dose recommended each pregnancy, ideally between 28-32 weeks, but may be given up until delivery.

<sup>h</sup> Refer to annual influenza information for recommended vaccine brand for age.

- Contact your State and Territory Health Department for further information on any additional immunisation programs specific to your State or Territory.
- All people aged less than 20 years are eligible for free catch up vaccines.
- Adult refugees and humanitarian entrants are eligible for free catch up vaccines.

### For more information

health.gov.au/immunisation

### State/Territory

Australian Capital Territory New South Wales Northern Territory Queensland South Australia Tasmania Victoria Western Australia

### **Contact Number**

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From 1 April 2019



Age	Disease	Vaccine Brand				
Childhood vaccination (also see influenza vaccine)						
Birth	Hepatitis B (usually offered in hospital) <sup>a</sup>	H-B-Vax® II Paediatric or Engerix B® Paediatric				
<b>2 months</b> Can be given from 6 weeks of age	iven from hepatitis B, polio, Haemophilus influenzae type b (Hib)					
4 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> <li>Pneumococcal</li> <li>Rotavirus<sup>b</sup></li> </ul>	Infanrix® hexa Prevenar 13® Rotarix®				
6 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenza</i>e type b (Hib)</li> </ul>	Infanrix® hexa				
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA) and medically at-risk children <sup>c</sup>	Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenza</i> e type b (Hib)     Pneumococcal     Meningococcal ACWy     Measles, mumps, rubella	Prevenar 13®				
12 months	Meningococcal ACWY     Measles, mumps, rubella     Preumococcal	Nimenrix® M-M-R® II or Priorix® Prevenar 13®				
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	• Hepátitis A	Vaqta® Paediatric				
18 months	<ul> <li>Haemophilus influenzae type b (Hib)</li> <li>Measles, mumps, rubella, varicella (chickenpox)</li> <li>Diphtheria, tetanus, pertussis (whooping cough)</li> </ul>	ActHIB® Priorix-Tetra® or ProQuad® Infanrix® or Tripacel®				
Additional vaccines for Aboriginal and Torres Strait Islander children (QLD, NT, WA and SA)	• Hepatitis A	Vaqta® Paediatric				
4 years	Diphtheria, tetanus, pertussis (whooping cough), polio	Infanrix® IPV or Quadracel®				
Additional vaccines for medically at-risk children <sup>c</sup>	Pneumococcal	Pneumovax 23®				

### From 1 April 2019



Age	Disease	Vaccine brand			
	Adolescent vaccination (also see influenza vaccin	e)			
<b>12–&lt;13 years</b> (School programs <sup>d</sup> )	<ul> <li>Human papillomavirus (HPV)<sup>e</sup></li> <li>Diphtheria, tetanus, pertussis (whooping cough)</li> </ul>	Gardasil®9 Boostrix®			
<b>14–&lt;16 years</b> (School programs <sup>d</sup> )	Meningococcal ACWY	Nimenrix®			
Adult vaccination (also see influenza vaccine)					
<b>15–49 years</b> Aboriginal and Torres Strait Islander people with medical risk factors <sup>c</sup>	• Pneumococcal	Pneumovax 23®			
50 years and over Aboriginal and Torres Strait Islander people	Pneumococcal     Pneumococcal     Shingles (herpes zoster)     Pertussis (whooping cough)*     Influenza*  Funded annual influenza vaccination*	Pneumovax 23®			
65 years and over	Pneumococcal	Pneumovax 23®			
<b>70–79 years</b> <sup>†</sup>	Shingles (herpes zoster)	Zostavax®			
Pregnant women	Pertussis (whooping cough)     Influenza <sup>h</sup>	Boostrix® or Adacel®			
	Funded annual influenza vaccination"				

### 6 months and over with certain medical risk factors

All Aboriginal and Torres Strait Islander people 6 months and over

### 65 years and over

### Pregnant women

- a Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
- <sup>b</sup> Rotavirus vaccine: First dose must be given by 14 weeks of age, the second dose by 24 weeks of age.
- <sup>c</sup> Refer to the current edition of *The Australian Immunisation Handbook* for all medical risk factors.
- <sup>d</sup> Contact your state or territory health service for school grades eligible for vaccination.
- e Observe Gardasil®9 dosing schedules by age and at-risk conditions. 2 doses: 9 to <15 years—6 months mininimum interval. 3 doses: ≥15 years and/or have certain medical conditions—0, 2 and 6 month schedule. Only 2 doses funded on the NIP unless 12-13 year old has certain medical risk factors.</p>

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- <sup>f</sup> All people aged 70 years old, with a five year catch-up program for people aged 71–79 years old until 31 October 2021.
- 9 Single dose recommended each pregnancy, ideally between 20-32 weeks, but may be given up until delivery.
- <sup>h</sup> Refer to annual influenza information for recommended vaccine brand for age.
- Contact your State and Territory Health Department for further information on any additional immunisation programs specific to your State or Territory.
- All people aged less than 20 years are eligible for free catch up vaccines.
- Adult refugees and humanitarian entrants are eligible for free catch up vaccines.

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### For more information

health.gov.au/immunisation

### State/Territory

Australian Capital Territ	iory
New South Wales	
Northern Territory	
Queensland	
South Australia	
Tasmania	
Victoria	
Western Australia	2

### Contact Number

(02) 6205 2300 1300 066 055 (08) 8922 8044 13 HEALTH (13 4325 84) 1300 232 272 1800 671 738 1300 882 008 (08) 9321 1312 DOCUMENT 12



Age	Disease	Vaccine Brand	Notes
Birth	Hepatitis B (usually offered in hospital)	H-B-Vax® II Paediatric or Engerix B® Paediatric	Hepatitis B vaccine: Should be given to all infants as soon as practicable after birth. The greatest benefit is if given within 24 hours, and must be given within 7 days.
<b>2 months</b> Can be given from 6 weeks of age	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> </ul>	Infanrix® hexa	Rotavirus vaccine: First dose must be given by 14 weeks of age.
	Rotavirus	Rotarix®	Meningococcal B vaccine: All Aboriginal and Torres Strait Islander children from 6 weeks of age,
	Pneumococcal	Prevenar 13®	with a three year catch-up program for Aboriginal and Torres Strait Islander children aged less than 2 years old until 30 June 2023. Refer to the Australian Immunisation Handbook (the
	Meningococcal B (Indigenous children)	Bexsero®	Handbook) for dose intervals.
4 months	Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)	Infanrix® hexa	Rotavirus vaccine: The second dose must be given by 24 weeks of age.
	Rotavirus	Rotarix®	
	Pneumococcal	Prevenar 13®	
	Meningococcal B (Indigenous children)	Bexsero®	
6 months	<ul> <li>Diphtheria, tetanus, pertussis (whooping cough), hepatitis B, polio, <i>Haemophilus influenzae</i> type b (Hib)</li> </ul>	Infanrix® hexa	Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required for Indigenous children living in WA, NT, SA, Qld, and all children with specified medical risk conditions for pneumococca
	Pneumococcal (All children with specified medical risk conditions)	Prevenar 13®	disease. <u>Refer to the Handbook</u> .
	Pneumococcal (Indigenous children living in WA, NT, SA, Qld)	Prevenar 13®	Meningococcal B vaccine: An additional (3rd) dose of Bexsero® is required for Indigenous children with specified medical risk conditions for meningococcal disease. <u>Refer to the Handbook</u> .
	Meningococcal B (Indigenous children with specified medical risk conditions)	Bexsero®	
12 months	Meningococcal ACWY	Nimenrix®	
	Measles, mumps, rubella	M-M-R <sup>®</sup> II or Priorix®	
	Pneumococcal	Prevenar 13®	
	Meningococcal B (Indigenous children)	Bexsero®	
	Haemophilus influenzae type b (Hib)	ActHIB®	Hepatitis A vaccine: First dose of the 2-dose hepatitis A vaccination schedule if not previously
18 months	Measles, mumps, rubella, varicella (chickenpox)	Priorix-Tetra® or ProQuad®	received a dose. The second dose is now scheduled at 4 years.
	Diphtheria, tetanus, pertussis (whooping cough)	Infanrix® or Tripacel®	
	Hepatitis A (Indigenous children in WA, NT, SA, Qld)	Vaqta® Paediatric	
4 years	Diphtheria, tetanus, pertussis (whooping cough), polio	Infanrix <sup>®</sup> IPV or Quadracel <sup>®</sup>	Pneumococcal vaccine: Administer first dose of 23vPPV at age 4 years, followed by second
•	Pneumococcal (All children with specified medical risk conditions)	Pneumovax 23®	dose of 23vPPV at least 5 years later. Refer to the Handbook for <u>risk conditions</u> .
	Pneumococcal (Indigenous children living in WA, NT,	5	Hepatitis A vaccine: Not required if previously received 2 doses (first dose at age ≥12 months)
	SA, Qld)	Pneumovax 23®	at least 6 months apart.

	A (also see influenza vaccine and ad	dolescent vac		ith medical risk conditions)		
Age	Disease	Vaccine Bran	d	Notes		
<b>12–13 years</b> (School program)	<ul><li>Diphtheria, tetanus, pertussis (whooping cough)</li><li>Human papillomavirus (HPV)</li></ul>	Boostrix® Gardasil®9		HPV vaccine: Observe Gardasil®9 dosing schedules by age and at-risk conditions. 9 to <15 years: 2 doses, 6 months minimum interval. ≥15 years and/or have or medical conditions: 3 doses, 0, 2 and 6 month schedule. Only 2 doses funded unless a 12–<15 year old has certain medical risk factors.		rs and/or have certain
<b>14–16 years</b> (School program)	Meningococcal ACWY	Nimenrix®				
	(also see influenza vaccine and ac	Adult vaccina dditional vaccinati		vith medical risk conditions)		
Age	Disease	Vaccine Brand	d	Notes		
50 years and over	Pneumococcal (Indigenous adults)	Prevenar 13® and Pr	neumovax 23®	Pneumococcal vaccine: Administer a dose of 13vPCV, followed by first dose of 23vPPV later (2–12 months acceptable), then second dose of 23vPPV at least 5 years later.		st dose of 23vPPV 12 months t 5 years later.
70 years and over	Pneumococcal (non-Indigenous adults)	Prevenar 13®		30 <sup>1</sup>		
70–79 years	Shingles (herpes zoster)	Zostavax®	(PC)	Shingles vaccine: All people aged 70 years old with a five year catch-up program for pe 71–79 years old until 31 October 2021.		
Pregnant women	Pertussis (whooping cough)	Boostrix <sup>®</sup> or Adace		Pertussis vaccine: Single dose reco but may be given up until delivery.	mmended each pregnancy, idea	ally between 20–32 weeks,
	Additional vaccination 1	for people with	n medical ris	k conditions		
Age/risk condition	Disease	Vaccine Bran	d S	Notes		
All people with asplenia, hyposplenia, complement deficiency and those undergoing treatment with eculizumab	Meningococcal ACWY     Meningococcal B	Nimenrix® Bexsero®		Meningococcal vaccines: Refer to the Handbook for dosing schedule. The number of doses required vary with age.		lle. The number of doses
People ≥5 years with asplenia or hyposplenia	Haemophilus influenzae type b (Hib)	Act-Hib®		Hib vaccine: A single dose is required if the person was not vaccinated in infancy or incom vaccinated. (Note that all children aged <5 years are recommended to complete Hib vaccir regardless of asplenia or hyposplenia)		
People <12 months of age with conditions that increase their risk of pneumococcal disease	<ul> <li>Haemophilus influenzae type b (Hib)</li> <li>Pneumococcal</li> <li>Pneumococcal</li> </ul>	Prevenar 13® and Pneumovax 23®		Pneumococcal vaccine: An additional (3rd) dose of 13vPCV is required at 6 months of age, followed by a routine booster at 12 months (all children), then a first dose of 23vPPV at age 4 years, followed by second dose of 23vPPV at least 5 years later. Refer to the Handbook risk conditions.		dose of 23vPPV at age
People ≥12 months of age with conditions that increase their risk of pneumococcal disease	Pneumococcal	Prevenar 13® and Pneumovax 23®		Pneumococcal vaccine: Administer a dose of 13vPCV at diagnosis followed by 2 doses of 23v Refer to the Handbook for dose intervals and <u>risk conditions</u> .		
Funded annual influenza vaccination (Refer to annual ATAGI advice on seasonal influenza vaccines)		catch-up vaccines. The number and range of vaccines and doses that are eligible for NIP funded catch-up is different for people aged less than 10 years and those       Australian Capital Territory       (02) 5' New South Wales         normal       Northern Territory       (08) 8'		Australian Capital Territory	<b>Contact Number</b> (02) 5124 9800 1300 066 055	
Children 6 months to less than 5 years of age				(08) 8922 8044		
People 6 months and over with specified medical risk conditions			Adult refugees and humanitarian entrants are eligible       South Australia       1300 232         for free catch-up vaccines. Refer to NIP catch-up fact       Tasmania       1800 671 7		HEALTH (13 4325 84) 1300 232 272	
People 65 years and over					1800 671 738 1300 882 008	
Pregnant women All Aboriginal and Torres Strait Isla	inder people 6 months and over		sheets.		Western Australia	(08) 9321 1312
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