



## Factsheet for vaccination providers

All individuals (including refugees and other humanitarian entrants) 10 to 19 years of age are eligible for free catch-up vaccines through the National Immunisation Program (NIP).

The catch-up schedule will need to commence before the individual's 20th birthday and may be completed beyond this date, as required. Funded vaccines for the eligible cohort are set out in **Table 1**. This cohort should also be evaluated regarding the need for other vaccines based on medical, lifestyle or occupational risk factors (e.g. influenza vaccine). Refer to the [Australian Immunisation Handbook](#) for more information.

### Assess vaccination history

All individuals 10 to 19 years of age will need an assessment of their immunisation status to clarify their vaccination history, enter their information into the Australian Immunisation Register (AIR) if it has not been recorded, and provide catch-up vaccines if needed.

Documentation of vaccination history may be found using the AIR. Slips provided after school vaccinations, yellow vaccination records and practice records also provide vaccination information.

Check that any previous doses were received at the correct age and dosing intervals.

For refugees and other humanitarian entrants aged 10 to 19 years, check if overseas (written) immunisation records are available.

Refugees and other humanitarian entrants may have received vaccinations through the visa application process or in Australian immigration detention. Check for documentation from sources such as:

- the Departure Health Check – provided to Offshore Humanitarian entrants (voluntary process)
- Australian immigration detention health records.

The Department of Social Services provides a free document translating service for Australian citizens and new migrants settling permanently in Australia. Within the first two years of arriving in Australia, eligible individuals can have key personal documents (including vaccination records) translated into English, free of charge, to assist with settlement into the community. The [Free Translating Service](#) is available on the Department of Social Services website.

### Create a catch-up schedule

Once an assessment of any existing vaccination records and other relevant clinical information is undertaken, develop a catch-up schedule. The objective of catch-up vaccination is to complete a course of age appropriate vaccination and provide optimal protection as quickly as possible, generally using minimum dosing intervals.

**If there is a written record of any vaccine doses, those doses should not be repeated and only enough doses to meet the total required should be given (see Table 1).**

**If prior vaccine doses cannot be confirmed due to incomplete documentation, it should generally be assumed that those doses have not been given.**

**Serological testing to determine the need for specific vaccinations is not routinely recommended. Serology for infection with or immunity to Hepatitis B should be considered for those with a high risk of past exposure.**

Apart from a possible increase in local adverse events for frequent doses of diphtheria/tetanus/pertussis-containing vaccines, there are no significant adverse events associated with additional doses of vaccines given to immune individuals.

Information on developing a catch-up schedule is available in the [Australian Immunisation Handbook](#) including intervals between vaccine doses and groups with special vaccination requirements, such as migrants to Australia.

### Reporting to the AIR

Vaccination providers should report to the AIR all vaccinations they give to their patients in Australia and those given overseas where the appropriate documentation is available. If your GP practice software does not automatically report vaccinations to the AIR, then you will need to report these vaccinations directly using the AIR site.

Information about registering to send or receive immunisation data from the AIR is available on the [Australian Government Department of Human Services](#) website.

### Ordering vaccines

Catch-up vaccines can be ordered through the process used to order other NIP vaccines.

Table 1: Nationally funded catch-up vaccines for children aged 10–19 years

Antigen	Total doses needed	Minimal interval between doses	Notes
Diphtheria, tetanus	3 doses	Between doses 1 and 2: 4 weeks Between doses 2 and 3: 4 weeks	People should receive 1 of the doses as dTpa-containing vaccine and complete the course with dT. This dose would also provide the catch-up dose for pertussis. If dT is not available, use dTpa or dTpa-IPV for all 3 primary doses.
Pertussis	1 dose	Not required	People ≥10 years of age who did not receive all the pertussis vaccine doses recommended before the age of 10 years only need 1 dose to be considered up to date. This is regardless of the number of previous doses they received before the age of 10 years. A booster dose of pertussis-containing vaccine is routinely recommended for all adolescents aged 11–13 years. Take this into account when planning catch-up for pertussis.
Poliomyelitis	3 doses	Between doses 1 and 2: 4 weeks Between doses 2 and 3: 4 weeks	None
Measles, mumps and rubella	2 doses	4 weeks	None
Hepatitis B <small>Note the age groups overlap and this is an either/or, not both</small>	3 paediatric doses aged 10–19 years	Between doses 1 and 2: 1 month Between doses 2 and 3: 2 months	Minimum interval between dose 1 and dose 3 is 4 months.
	2 adult doses aged 11–15 years only	4 months	None
Meningococcal	1 dose of meningococcal C vaccine aged 10–14 years	Not required	None
	1 dose of meningococcal ACWY vaccine aged 15–19 years	Not required	None
Varicella	At least 1 dose if aged <14 years	Between doses 1 and 2: 4 weeks (if 2nd dose is given)	Recommended for all non-immune people. People aged <14 years are recommended to receive at least 1 and preferably 2 doses (only one dose is funded). Children aged under 14 years can receive MMRV.
	2 doses if aged ≥14 years	4 weeks	2 doses are recommended for all non-immune people aged ≥14 years. MMRV is not recommended for use in people ≥14 years of age.
Human papillomavirus	2 doses if started at 9–14 years of age	6 months	If there is an interval of <5 months between doses 1 and 2, a 3rd dose is needed at least 12 weeks after the 2nd dose. (Note only two doses are funded). If there is an interval of <6 months but ≥5 months between doses 1 and 2, a 3rd dose is not needed. People who are immunocompromised need a 3-dose schedule, regardless of age when they start vaccination.
	3 doses if started at ≥15 years of age	Between doses 1 and 2: 4 weeks Between doses 2 and 3: 12 weeks	Minimum interval between dose 1 and dose 3 is 5 months. (Note only two doses are funded).

State and territory health department contact numbers:

ACT	02 6205 2300	SA	1300 232 272
NSW	1300 066 055	TAS	1800 671 738
NT	08 8922 8044	VIC	1300 882 008
WA	08 9321 1312	QLD	13 HEALTH (13 432 584)



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