

Instructions for Interpreting Revaccination Tables

Patients who have received vaccines only from the pediatrician and no other source

1. Select the table that includes your patient's age when you plan to administer to first set of catch-up vaccinations (“Initial Vaccination” on the tables). These tables are designed to account for the possibility that the patient might “age out of” the age range for a given table. Use the table selected at the initial vaccination throughout the revaccination series. Providers might want to consider making a copy of the appropriate table and placing it in the patient’s chart for easy reference.
2. Starting with initial vaccination, administer the vaccines at the indicated intervals. All interval times are the number of weeks since the initial vaccination for each series. Please note, not every table has the same intervals. The table selected should be closely examined to ensure proper vaccine administration.

Patients who have received at least one vaccine from a source other than the pediatrician

1. Select the table that includes your patient's age when you plan to administer the first set of catch-up vaccinations (“Initial Vaccination” on the tables). These tables are designed to account for the possibility that the patient might “age out of” a given table. Use the table selected at the initial vaccination throughout the series. Providers might want to consider making a copy of the appropriate table and placing it in the patient’s chart for easy reference.
2. For vaccination series that were previously started by a provider other than the pediatrician, start with the next vaccination in that series. Use the date that the last documented vaccination in the series was administered as the “initial vaccination” date, and administer the subsequent vaccines in the series at the prescribed intervals. Previous vaccination history will only apply to the series that were previously started. Vaccination series that have not been started should be given as prescribed in the table starting with the first vaccine in the series.

NOTE REGARDING VACCINE TYPES AND FDA LABELING:

Some pediatric vaccines are only labeled or indicated for use under a certain age. For patients who are above the maximum age for a given vaccination series, the series has been shortened or omitted entirely (e.g., Hib is not indicated for patients ≥ 5 years of age).

*Combination vaccines may be used when all antigens in the combination vaccine are being given at a single visit. **The third hepatitis B vaccination must be a monovalent vaccine.***

NOTE REGARDING DTaP REVACCINATION:

In the event of a severe local reaction to DTaP vaccination, test for specific IgG antibody to tetanus and diphtheria toxins, and discontinue vaccination if titers are protective. If titers are not protective, administer an additional booster dose with caution and repeat serologic testing afterwards.

Alternatives to Recommended Approach

Healthcare providers might choose an alternative approach for some patients (e.g., patients with a documented history of vaccine reactions, patients with autoimmune disorders). Not all vaccines have acceptable alternative approaches. If serologic testing reveals nonprotective titers, patients should be revaccinated per the included age-appropriate table unless there is a compelling medical contraindication to revaccination.

Vaccine	Alternative Approach
Measles, mumps, and rubella (MMR)	Serologic testing for immunoglobulin G (IgG) antibody to measles, mumps, and rubella. If antibody titer against any of the viruses is below the protective range, revaccinate per the appropriate age table
<i>Haemophilus influenzae</i> type b (Hib)	None
Hepatitis A	Serologic testing for immunoglobulin G (IgG) antibody to hepatitis A. If antibody titer against the virus is below the protective range, revaccinate per the appropriate age table
Hepatitis B	None
Poliovirus (IPV)	Serologic test for neutralizing antibody against poliovirus types 1, 2, and 3 (limited availability)
Diphtheria and tetanus toxoids and acellular pertussis (DTaP)	Serologic testing for specific immunoglobulin G (IgG) antibody to tetanus and diphtheria toxins. If antibody titer against any of the toxins is below the protective range, revaccinate per the appropriate age table
Varicella	Serologic testing for immunoglobulin G (IgG) antibody to varicella. If antibody titer against the virus is below the protective range, revaccinate per the appropriate age table. Patients with documented history of varicella infection (i.e., chicken pox) do not need to be revaccinated.
Pneumococcal conjugate (PCV)	None