

New Jersey Department of Health Vaccine Preventable Disease Program Childhood and Adolescent Recommended Vaccines



2022



Phil Murphy, Governor
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Commissioner

**New Jersey Department of Health
Vaccine Preventable Disease Program
Childhood and Adolescent Recommended Vaccines**

Antigens	Vaccine	Approved Age	Indications for Use Vaccine Manufacturer Package Inserts	Advisory Committee on Immunization Practices (ACIP) Recommended Schedule*
COVID-19	Pfizer/BioNTech/ COMIRNATY	≥ 5 yrs	Visit the following for product information: https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/index.html	<p style="text-align: center;"><u>COVID-19</u></p> <p>ACIP recommends use of COVID-19 vaccines within the scope of the Emergency Use Authorization or Biologics License Application for the particular vaccine.</p> <p>CDC is now recommending that people get a Pfizer or Moderna COVID-19 vaccine over the J&J vaccine. This recommendation was based on the latest scientific evidence on vaccine effectiveness, vaccine safety, and considerations of the U.S. supply.</p> <p>Interim ACIP recommendations for the use of COVID-19 vaccines can be found at</p>
COVID-19	Moderna/Spikevax	≥ 18 yrs	Visit the following for product information: https://www.cdc.gov/vaccines/covid-19/info-by-product/moderna/index.html	
COVID-19	Johnson & Johnson's (J&J) Janssen	≥ 18 yrs	Visit the following for product information: https://www.cdc.gov/vaccines/covid-19/info-by-product/janssen/index.html	

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				https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html COVID-19 vaccine and other vaccines may be administered on the same day.
Diphtheria, Tetanus, and acellular Pertussis (DTaP)	Daptacel (Sanofi Pasteur)	6 wks through 6 yrs	5 dose series recommended to be administered at 2, 4, 6, 15-20 months of age, and 4 to 6 years of age.	<p style="text-align: center;"><u>DTaP</u></p> 5-dose series of DTaP vaccine at ages 2, 4, 6, 15 through 18 months, and 4 through 6 years. Prospectively: A 4th dose may be given as early as age 12 months if at least 6 months have elapsed since dose 3. Retrospectively: A 4th dose that was inadvertently given as early as 12 months may be counted if at least 4 months have elapsed since dose 3.
Diphtheria, Tetanus, and acellular Pertussis (DTaP)	Infanrix (GlaxoSmithKline)	6 wks through 6 yrs	5 dose series recommended to be administered at 2, 4, 6, 15-20 months of age, and 4 to 6 years of age.	
Diphtheria, Tetanus, and acellular Pertussis (DTaP), Hepatitis B and inactivated Polio (IPV)	Pediarix (GlaxoSmithKline)	6 wks through 6 yrs	3 dose series recommended to be administered at 2, 4, and 6 months of age.	
Diphtheria, Tetanus, and acellular Pertussis (DTaP), inactivated Polio (IPV), and <i>Haemophilus influenzae</i> type b (Hib)	Pentacel (Sanofi Pasteur)	6 wks through 4 yrs	4 dose series recommended to be administered at 2, 4, 6, and 15-18 months of age.	

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Diphtheria, Tetanus, and acellular Pertussis (DTaP), inactivated Polio (IPV)	Quadracel (Sanofi Pasteur)	4 through 6 yrs	A single dose to be used as a fifth dose in the diphtheria, tetanus, pertussis vaccination (DTaP) series, and as a fourth or fifth dose in the inactivated poliovirus vaccination (IPV) series, in children who have received 4 doses of Pentacel and/or DAPTACEL vaccine.
Diphtheria, Tetanus, and acellular Pertussis (DTaP), inactivated Polio (IPV)	Kinrix (GlaxoSmithKline)	4 through 6 yrs	A single dose to be used as the fifth dose in the diphtheria, tetanus, and acellular pertussis (DTaP) vaccine series and the fourth dose in the inactivated poliovirus vaccine (IPV) series in children 4 through 6 years of age whose previous DTaP vaccine doses have been with INFANRIX and/or PEDIARIX for the first three doses and INFANRIX for the fourth dose.
Diphtheria, Tetanus, and acellular Pertussis (DTaP), inactivated polio (IPV), hepatitis B, <i>Haemophilus influenzae</i> type B	Vaxelis (Sanofi Pasteur and Merck)	6 wks through 4 yrs	3 dose series recommended to be administered at 2, 4, and 6 months of age. A 3-dose series of VAXELIS does not constitute a primary immunization series against pertussis; an additional dose of pertussis-containing vaccine is needed to complete the primary series.
Diphtheria and Tetanus (DT)	DT (Sanofi Pasteur)	6 wks through 6 yrs	5 dose series recommended to be administered at 2, 4, 6, 15-20 months of age, and 4 to 6 years of age.

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Tetanus diphtheria (Td)	TDVAX (Generic) (Mass Biologics)	≥ 7 yrs	<ul style="list-style-type: none"> Primary immunization consists of 3 doses. Td may be used for routine booster immunization against tetanus and diphtheria in persons 7 years of age and older who have completed primary immunization against tetanus and diphtheria. 	<p style="text-align: center;"><u>Td</u></p> <p>Persons aged 7 years and older who are not fully immunized with DTaP vaccine should follow the CDC catch-up schedule.</p>
Tetanus diphtheria (Td)	TENIVAC (Sanofi Pasteur)	≥ 7 yrs		
Tetanus diphtheria, acellular Pertussis (Tdap)	Boostrix (GlaxoSmithKline)	≥ 10 yrs	One-time booster dose.	<p style="text-align: center;"><u>Tdap</u></p> <p>Administer 1 dose of Tdap vaccine to all adolescents aged 11 through 12 years.</p> <p>Administer 1 dose of Tdap vaccine to pregnant adolescents during each pregnancy (preferred during 27 through 36 weeks gestation) regardless of time since prior Td or Tdap vaccination.</p> <p>Tdap may be used to catch-up on primary series, refer to CDC catch-up schedule for detailed information.</p> <p>Tdap may be administered regardless of the interval since the last tetanus and diphtheria toxoid-containing vaccine.</p>
Tetanus diphtheria, acellular Pertussis (Tdap)	Adacel (Sanofi Pasteur)	10 through 64 yrs	One-time booster dose.	

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Haemophilus influenzae type b (Hib)	ActHIB (Sanofi Pasteur)	2 mos through 5 yrs	4 dose series recommended to be administered at 2, 4, and 6 months of age, and a booster dose at 15-18 months of age.	<p style="text-align: center;"><u>Hib</u></p> <p>ActHIB, Hiberix, or Pentacel: 4-dose series at 2, 4, 6, 12–15 months.</p> <p>PedvaxHIB: 3-dose series at 2, 4, 12–15 months.</p>
Haemophilus influenzae type b (Hib)	HIBERIX (GlaxoSmithKline)	6 wks through 4 yrs	4 dose series recommended to be administered at 2, 4, and 6 months, and a booster dose at 15-18 months.	
Haemophilus influenzae type b (Hib)	PedvaxHIB (Merck)	2 mos to 71 mos	<ul style="list-style-type: none"> • Two doses recommended to be administered at 2 and 4 months of age. • In infants completing the primary two-dose regimen before 12 months of age, a booster dose should be administered at 12 to 15 months of age, but not earlier than 2 months after the second dose. 	
Hepatitis A	Havrix (GlaxoSmithKline)	≥ 12 mos	2 dose series with the second dose administered 6 to 12 months later.	<p style="text-align: center;"><u>Hepatitis A</u></p> <p>2-dose series (minimum interval: 6 months) beginning at age 12 months.</p>
Hepatitis A	Vaqa (Merck)	≥ 12 mos	2 dose series with the second dose administered 6 to 18 months later.	

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Hepatitis A Hepatitis B	TWINRIX (GlaxoSmithKline)	≥ 18 yrs	<ul style="list-style-type: none"> 3 dose series recommended to be administered on a 0-, 1-, and 6-month schedule. Accelerated dosing: A series of 4 doses given on days 0, 7, and 21 to 30 followed by a booster dose at month 12. 	
Hepatitis B	Engerix-B (GlaxoSmithKline)	≥ 0 mos	3 dose series recommended to be administered on a 0-, 1-, and 6-month schedule.	<p style="text-align: center;"><u>Hepatitis B</u></p> <p>3-dose series at 0, 1–2, 6–18 months (use monovalent HepB vaccine for doses administered before age 6 weeks).</p> <p>Infants who did not receive a birth dose should begin the series as soon as feasible.</p> <p>Administration of 4 doses is permitted when a combination vaccine containing HepB is used after the birth dose.</p> <p>Minimum age for the final (3rd or 4th) dose: 24 weeks.</p> <p>Minimum intervals: dose 1 to dose 2: 4 weeks dose 2 to dose 3: 8 weeks dose 1 to dose 3: 16 weeks (when 4 doses are administered, substitute “dose 4” for “dose 3” in these calculations).</p>
Hepatitis B	HEPLISAV-B (Dynavax)	≥ 18 yrs	2 doses administered one month apart.	
Hepatitis B	Recombivax-HB (Merck)	≥ 0 mos	<ul style="list-style-type: none"> 3 dose series recommended to be administered on a 0-,1-, and 6-month schedule. An alternate two-dose series can be administered to adolescents (11 through 15 years of age) with the first dose given on elected date and second dose: 4-6 months later. 	

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Human Papillomavirus (9vHPV)	Gardasil 9 (Merck)	9 through 45yrs	<ul style="list-style-type: none"> Routine vaccination for all adolescents at 11–12 years (can start at age 9) Number of doses dependent on age at initial vaccination. 	<p style="text-align: center;"><u>HPV</u></p> <p>HPV vaccination recommended for all persons through age 26 years:</p> <p>Age 9–14 years at initiation: 2-dose series at 0 and 6–12 months (minimum interval: 5 months; repeat a dose given too soon).</p> <p>Age 15 years or older at initiation:</p> <p>3-dose series at 0, 1–2 months, and 6 months (minimum intervals: Dose 1-2: 4 weeks Dose 2-3: 12 weeks Dose 1-3: 5 months Repeat dose if administered too soon).</p> <p>Persons who have completed a valid series with any HPV vaccine do not need any additional doses.</p> <p>Some adults age 27–45 years: may receive the vaccine based on shared clinical decision-making.</p>
Influenza (flu)	Various https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm	≥ 6 mos	Recommended seasonally for individuals 6 months of age and older.	<p style="text-align: center;"><u>Influenza</u></p> <p>Administer influenza vaccine annually to all children beginning at age 6 months.</p>

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				Children 6 months-8 years may need two doses. Consult with your healthcare provider for more details.
Measles, Mumps, Rubella (live) (MMR)	M-M-R II (Merck)	\geq 12 mos	Two-dose schedule recommended to be administered with the 1st dose at 12 to 15 months and the 2nd dose at age 4 to 6 years (prior to elementary school entry).	<u>MMR</u> 2-dose series of MMR at 12–15 months, 4–6 years Dose 2 may be administered as early as 4 weeks after dose 1.
Measles, Mumps, Rubella and Varicella (MMRV)	ProQuad (Merck)	12 mos through 12 yrs	Two dose series with the 1 st dose recommended to be administered at 12 to 15 months.. The second dose is usually given at 4 to 6 years. <i>Note: At least 1 month should elapse between a dose of a measles-containing vaccine such as M-M-R® II (measles, mumps, and rubella virus vaccine live) and a dose of ProQuad. At least 3 months should elapse between a dose of varicella-containing vaccine and ProQuad.</i>	

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Meningococcal Conjugate Vaccine (serogroups A, C, Y, W-135)	Menveo (GlaxoSmithKline)	2 mos through 55 yrs	<ul style="list-style-type: none"> For children <u>23 months of age and younger</u>: Recommended to be used as a 2 or 4 dose series depending on age of administration. Individuals 2 years through 55 years of age are recommended to receive a single dose. 	<p align="center"><u>Meningococcal</u></p> <p>Two dose series: 11-12 years and one dose 16-18 years.</p>
Meningococcal Conjugate Vaccine (serogroups A, C, Y, W-135)	MenQuadfi (Sanofi Pasteur)	≥ 2 yrs	Individuals 2 years and older: a single dose.	
Meningococcal Conjugate Vaccine (serogroups A, C, Y, W-135)	Menactra (Sanofi Pasteur)	9 mos through 55 yrs	<ul style="list-style-type: none"> <u>Children 9 through 23 months of age</u>: Two doses, three months apart. <u>Individuals 2 through 55 years of age</u>: A single dose. 	
Meningococcal Vaccine (serogroup B)	Trumenba (Wyeth/Pfizer)	10 through 25 years of age	<p>Three-dose schedule: Administer a dose at 0, 1–2, and 6 months.</p> <p>Two-dose schedule: Administer a dose at 0 and 6 months. If the second dose is administered earlier than 6 months after the first dose, a third dose should be administered at least 4 months after the second dose.</p> <p>The choice of dosing schedule may depend on the risk of exposure and the patient's susceptibility to meningococcal serogroup B disease.</p>	<p align="center"><u>Meningococcal B</u></p> <p>MenB vaccines may be given at clinical discretion to adolescents 16–23 years (preferred age 16–18 years) who are not at increased risk.</p> <p>Note: Bexsero and Trumenba are not interchangeable.</p>
Meningococcal Vaccine (serogroup B)	Bexsero (GlaxoSmithKline)	10 through 25 years of age	<ul style="list-style-type: none"> Administer two doses at least one month apart. 	

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Pneumococcal 13-Valent Conjugate Vaccine (PCV-13)	Prevnar 13 (Wyeth/Pfizer)	6 wks through 5 yrs; Children 6 through 17 yrs of age; and \geq 18 yrs	<ul style="list-style-type: none"> • <u>Children 6 weeks through 5 years</u>: The four-dose immunization series consists of doses administered at 2, 4, 6, and 12-15 months of age. • <u>Children 6 through 17 years of age</u>: a single dose. • <u>Adults 18 years and older</u>: a single dose. 	<p style="text-align: center;"><u>Pneumococcal</u></p> Administer a 4-dose series of PCV13 vaccine at ages 2, 4, and 6 months and at age 12 through 15 months.
Pneumococcal 20-Valent Conjugate Vaccine (PCV-20)	Prevnar 20 (Wyeth/Pfizer)	\geq 18 yrs	Administer a single dose.	
Pneumococcal -Valent Conjugate Vaccine (PCV-15)	Vaxneuvance (Merck)	\geq 18 yrs	Administer a single dose.	
Pneumococcal Polysaccharide (PPSV)	Pneumovax 23 (Merck)	\geq 50 yrs and \geq 2 yrs who are at increased risk for pneumococcal disease	Administer a single dose.	

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Polio (Inactivated)	IPOL (Sanofi Pasteur)	≥ 6 wks	<p>4 doses series recommended to be administered at ages 2, 4, 6 to 18 months and 4 to 6 years.</p> <p>Oral Polio Vaccine (OPV) is no longer available in the US and is not recommended for routine immunization.</p>	<p style="text-align: center;"><u>Polio</u></p> <p>4-dose series at ages 2, 4, 6–18 months, and 4–6 years. Administer the final dose on or after the 4th birthday and at least 6 months after the previous dose.</p> <p>4 or more doses of IPV can be administered before the 4th birthday when a combination vaccine containing IPV is used. However, a dose is still recommended after the 4th birthday and at least 6 months after the previous dose.</p> <p><u>IPV is not routinely recommended for U.S. residents 18 years and older.</u></p>
Rotavirus Vaccine (RV) Live, Oral	Rotarix (GlaxoSmithKline)	6 to 24 wks	<ul style="list-style-type: none"> Administer first dose to infants beginning at 6 weeks of age. Administer second dose after an interval of at least 4 weeks and up to 24 weeks of age. 	<p style="text-align: center;"><u>Rotavirus</u></p> <p>Rotarix: 2-dose series at 2 and 4 months. RotaTeq: 3-dose series at 2, 4, and 6 months.</p>
Rotavirus Vaccine (RV) Live, Oral, Pentavalent	RotaTeq (Merck)	6 to 32 wks	<ul style="list-style-type: none"> Administer first dose starting at 6 to 12 weeks of age, with the subsequent doses administered at 4- to 10-weeks intervals. The third dose should not be given after 32 weeks of age. 	<p>If any dose in the series is either RotaTeq or unknown, default to 3-dose series.</p>

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Varicella (Chickenpox)	Varivax (Merck)	≥ 12 mos	<p><u>Children (12 months to 12 years of age):</u> Administer first dose at 12-15 months and second dose at 4-6 years of age. There should be a minimum interval of 3 months between doses.</p> <p><u>Adolescents (≥13 years of age) and Adults:</u> Two doses, to be administered a minimum of 4 weeks apart.</p>	<p><u>Varicella</u></p> <p>2-dose series: 12–15 months and 4–6 years.</p> <p>The 2nd dose may be given as early as 3 months after the 1st dose (a dose given after a 4-week interval may be counted).</p>
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FOR CHILD CARE/PRESCHOOL DIRECTORS AND PARENTS: IMMUNIZATION REQUIREMENTS



**NJ Department of Health (NJDOH)
Vaccine Preventable Disease Program**

Summary of NJ Child Care/Preschool Immunization Requirements

Listed in the chart below are the minimum required number of doses your child must have to attend a NJ child care/preschool.* This is strictly a summary document. Exceptions to these requirements (i.e. provisional admission, grace periods, and exemptions) are specified in the Immunization of Pupils in School rules, New Jersey Administrative Code (N.J.A.C. 8:57-4). Please reference the administrative rules for more details https://www.nj.gov/health/cd/imm_requirements/acode/. Additional vaccines are recommended by Advisory Committee on Immunization Practices (ACIP) for optimal protection. For the complete ACIP Recommended Immunization Schedule, please visit <http://www.cdc.gov/vaccines/schedules/index.html>.

At this age the child should have received the following vaccines:	2 months	4 months	6 months	12 months	15 months	18 months	19 months	20-59 months
Diphtheria, tetanus & acellular pertussis (DTaP)	Dose #1	Dose #2	Dose #3			Dose #4		
Inactivated Poliovirus (Polio)	Dose #1	Dose #2				Dose#3		
<i>Haemophilus influenzae</i> type b (Hib)	Dose #1	Dose #2		1-4 doses [†] (see footnote)		At least 1 dose given on or after the first birthday		
Pneumococcal conjugate (PCV 13)	Dose #1	Dose #2		1-4 doses [†] (see footnote)	At least 1 dose given on or after the first birthday			
Measles, mumps, rubella (MMR)					Dose #1 [‡]			
Varicella (VAR)							Dose #1 [§]	
Influenza (IIV; LAIV)				One dose due each year ^l				

***Interpretation:** Children need to receive the minimum number of age-appropriate vaccines prior to entering child care/preschool. For example, a child 2 months of age, must have 1 dose each of DTaP, Polio, Hib, and PCV before being permitted to enter child care/preschool. A child entering at a younger age range than listed above must have proof of receiving vaccines in the previous age bracket. Example: A child entering child care/preschool at 11 months of age, would need at least the following: 3 DTaP, 2 Polio, 2 Hib, and 2 PCV. If a child has not received any vaccines, he/she would need at least one dose of each required vaccine to enter school provisionally and be in the process of receiving the remaining doses as rapidly and as medically feasible. The current seasonal flu vaccine is required every year by December 31 for children 6-59 months of age.

FOR CHILD CARE/PRESCHOOL DIRECTORS AND PARENTS: IMMUNIZATION REQUIREMENTS

† **Haemophilus influenzae type b (Hib) and pneumococcal (PCV)** vaccines are special cases. If children started late with these vaccines they may need fewer doses. One dose of each is required on or after the first birthday in all cases.

Please Note: The use of combination vaccines may allow students to receive the 1st birthday booster dose of Hib between 15-18 months of age.

‡ **MMR vaccine may be given as early as 12 months of age**, but NJ requires children to receive the vaccine by 15 months of age. Prior to age 15 months, children may enter preschool/child care without a documented dose of MMR.

§ **Varicella vaccine may be given as early as 12 months of age**, but NJ requires children to receive the vaccine by 19 months of age. Prior to age 19 months, children may enter preschool/child care without a documented dose of varicella. Children who previously had chickenpox do not need to receive the varicella vaccine as long as a parent/guardian can provide the school with one of the following: 1) Documented laboratory evidence showing immunity (protection) from chickenpox, 2) A physician's written statement that the child previously had chickenpox, or 3) A parent's written statement that the child previously had chickenpox.

Seasonal Flu: The current seasonal influenza vaccine is required every year for those children 6 months through 59 months of age. Children who have not received the flu vaccine by December 31 must be excluded (not allowed to attend child care/preschool) for the duration of influenza season (through March 31), until they receive at least one dose of the influenza vaccine or until they turn 60 months of age. Children entering child care/preschool after December 31, must provide documentation of receiving the current seasonal flu vaccine. Children entering child care/preschool after March 31 are not required to receive the flu vaccine; however, flu season may extend until May and therefore getting a flu vaccine even late in the season is still protective.

NOTE: NJ also accepts valid medical and religious exemptions (reasons for not showing proof of immunizations) as per the NJ Immunization of Pupils in School regulations, (N.J.A.C. 8:57-4). Children without proof of immunity as defined by ACIP, including those with medical and religious exemptions, may be excluded from a school, preschool, or child care facility during a vaccine preventable disease outbreak or threatened outbreak as determined by the Commissioner, Department of Health or his or her designee. In addition, anybody having control of a school may, on account of the prevalence of any communicable disease, or to prevent the spread of communicable disease, prohibit the attendance of any teacher or pupil of any school under their control and specify the time during which the teacher or scholar shall remain away from school. The Department of Health shall provide guidance to the school of the appropriateness of any such prohibition.

This document is meant to be a quick resource. For more information “NJ Immunization Requirements Frequently Asked Questions”, please visit https://nj.gov/health/cd/imm_requirements/.

Reviewed: 12/2021

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FOR SCHOOLS AND PARENTS: K-12 IMMUNIZATION REQUIREMENTS



NJ Department of Health (NJDOH) Vaccine Preventable Disease Program

Summary of NJ School Immunization Requirements

Listed in the chart below are the minimum required number of doses your child must have to attend a NJ school.* This is strictly a summary document. Exceptions to these requirements (i.e. provisional admission, grace periods, and exemptions) are specified in the Immunization of Pupils in School rules, New Jersey Administrative Code (N.J.A.C. 8:57-4). Please reference the administrative rules for more details https://www.nj.gov/health/cd/imm_requirements/acode/. Additional vaccines are recommended by Advisory Committee on Immunization Practices (ACIP) for optimal protection. For the complete ACIP Recommended Immunization Schedule, please visit <http://www.cdc.gov/vaccines/schedules/index.html>.

Grade/level child enters school:	Minimum Number of Doses for Each Vaccine						
	DTaP Diphtheria, Tetanus, acellular Pertussis	Polio Inactivated Polio Vaccine (IPV)	MMR (Measles, Mumps, Rubella)	Varicella (Chickenpox)	Hepatitis B	Meningococcal	Tdap (Tetanus, diphtheria, acellular pertussis)
Kindergarten – 1st grade	A total of 4 doses with one of these doses on or after the 4 th birthday <u>OR</u> any 5 doses [†]	A total of 3 doses with one of these doses given on or after the 4 th birthday <u>OR</u> any 4 doses [‡]	2 doses [§]	1 dose [¶]	3 doses	None	None
2nd – 5th grade	3 doses <i>NOTE: Children 7 years of age and older, who have not been previously vaccinated with the primary DTaP series, should receive 3 doses of Td. For use of Tdap, see footnote. †</i>	3 doses	2 doses	1 dose	3 doses	None	See footnote [†]
6th grade and higher	3 doses	3 doses	2 doses	1 dose	3 doses	1 dose required for children born on or after 1/1/97 <u>given no earlier than ten years of age</u> [¶]	1 dose required for children born on or after 1/1/97 [¶]

* Children who did not receive any vaccines would need at least one dose of each required vaccine to enter school provisionally.

† **DTaP:** Children who previously attended child care/preschool should have received 4 doses since the requirement to receive the fourth birthday booster dose (5th dose) does not apply until they attend Kindergarten. However, if one of these 4 doses was given on or after the 4th birthday, an additional dose is not needed for Kindergarten. Alternatively, any 5 doses are acceptable.

Children seven years and older who are not fully immunized with DTaP vaccine should have a history of receiving at least three doses of DTaP, Td, and/or Tdap or should use the CDC Catch-Up schedule to get caught up. Tdap given at ages 10 and older can count towards the sixth-grade school requirement. For CDC schedules and catch-up guidance, visit <https://www.cdc.gov/vaccines/schedules/hcp/imz/catchup.html>.

‡ **Polio:** Children who previously attended child care/preschool should have 3 doses since the requirement to receive the fourth birthday booster dose (4th dose) does not apply until they attend Kindergarten. However, if one of these 3 doses was given on or after the 4th birthday, no additional doses are needed for Kindergarten. Alternatively, any 4 doses are acceptable.

§ **MMR:** Children are required to receive two doses of measles, one dose of mumps, and one dose of rubella once they enter Kindergarten. Since single antigen (separate components of the vaccine) is not readily available, most children will have two MMR vaccines.

The Antibody Titer Law (Holly's Law, NJS 26:2N-8-11), passed on January 14, 2004, requires the New Jersey Department of Health (NJDOH) to accept serologic evidence of protective immunity to measles, mumps and rubella in lieu of the second ACIP recommended measles, mumps and rubella vaccine. For more information, please visit http://nj.gov/health/cd/documents/antibody_titer_law.pdf.

Varicella vaccine is only required for children born on or after January 1, 1998. Children who previously had chickenpox do not need to receive the varicella vaccine as long as a parent/guardian can provide the school with one of the following: 1) Documented laboratory evidence showing immunity (protection) from chickenpox, 2) A physician's written statement that the child previously had chickenpox, or 3) A parent's written statement that the child previously had chickenpox.

¶ **Meningococcal and Tdap** vaccines are required for all entering 6th graders who are 11 years of age or older. If in 6th grade and under age 11, children must receive the vaccines within 2 weeks of their 11th birthday. Meningococcal (MenACWY) vaccines administered at age 10 or older will be accepted for NJ school attendance. As of the 2020-2021 school year, children who receive a Tdap before age 10 would need to receive an additional dose to meet NJ's immunization requirements for sixth grade and higher. Note, ACIP no longer recommends a minimum interval between a dose of Tdap and a tetanus-diphtheria-containing vaccine, however, current rule [N.J.A.C. 8:57-4.10(i)] states a minimum of five years must have elapsed from the last tetanus-and diphtheria-containing dose.

NOTE: NJ also accepts valid medical and religious exemptions (reasons for not showing proof of immunizations) as per the NJ Immunization of Pupils in School regulations, (N.J.A.C. 8:57-4). Children without proof of immunity as defined by ACIP, including those with medical and religious exemptions, may be excluded from a school, preschool, or child care facility during a vaccine preventable disease outbreak or threatened outbreak as determined by the Commissioner, Department of Health or his or her designee. In addition, anybody having control of a school may, on account of the prevalence of any communicable disease, or to prevent the spread of communicable disease, prohibit the attendance of any teacher or pupil of any school under their control and specify the time during which the teacher or scholar shall remain away from school. The Department of Health shall provide guidance to the school of the appropriateness of any such prohibition.

This document is meant to be a quick resource. For more information “NJ Immunization Requirements Frequently Asked Questions”, please visit https://nj.gov/health/cd/imm_requirements/.

This information is provided to you by the

**New Jersey Department of Health
Vaccine Preventable Disease Program
609-826-4861**

For Additional Information:

New Jersey Department of Health Communicable Disease Service http://nj.gov/health/cd/index.shtml	Centers for Disease Control and Prevention http://www.cdc.gov/vaccines/
New Jersey Department of Health Vaccine Preventable Disease Program https://www.nj.gov/health/cd/vpdp.shtml	ACIP Recommendations http://www.cdc.gov/vaccines/hcp/acip-recs/index.html
New Jersey Vaccines for Children Program https://njiis.nj.gov/core/web/index.html#/vfcDocs	Vaccine Package Inserts http://www.immunize.org/packageinserts/
New Jersey Immunization Information System https://njiis.nj.gov/njiis/	Vaccine Information Statements http://www.cdc.gov/vaccines/hcp/vis/index.html
New Jersey Disease Reporting Requirements/Regulations: http://nj.gov/health/cd/reporting/when/	Guide to Contraindications and Precautions to Commonly Used Vaccines http://www.immunize.org/catg.d/p3072A.pdf
New Jersey School Health https://www.nj.gov/health/cd/topics/schoolhealth.shtml	Vaccine Adverse Event Reporting System http://vaers.hhs.gov/index
New Jersey COVID-19 Vaccine Page https://www.state.nj.us/health/cd/topics/covid2019_vaccination.shtml	New Jersey COVID-19 Information Hub https://covid19.nj.gov/