ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM

VACCINES TO PREVENT POLIOMYELITIS

The purpose of this resolution is to revise the previous resolution to incorporate the use of a pentavalent vaccine: diphtheria and tetanus toxoids, acellular pertussis, haemophilus influenza type b, and polio vaccines and a quadravalent vaccine: diphtheria and tetanus toxoids, acellular pertussis, and polio vaccines.

VFC resolution 2/03-3 is repealed and replaced by the following:

Eligible Groups

Children who are 6 weeks of age through 18 years. DTaP-Hep B-IPV (PEDIARIX®) combination vaccine is approved for children ≥ 6 weeks to <7 years of age. DTaP-Hib-IPV (Pentacel®) combination vaccine is approved for children ≥ 6 weeks to <5 years of age. DTaP-IPV (KinrixTM) combination vaccine is approved for the booster dose for children ≥ 4 years to <7 years of age. The use of brand names is not meant to preclude the use of other comparable licensed vaccines.

Recommended Schedule for Polio Vaccines

Age
2 months
4 months
6-18 months
4-6 years

Dosage Intervals for Vaccination for Polio Containing Vaccines

Vaccine	Minimum Age (Dose 1)	Minimum interval between doses		
		Dose 1 to 2	Dose 2 to 3	Dose 3 to 4
IPV*	6 weeks	4 weeks	4 weeks	4 weeks
DTaP-HepB-IPV†	6 weeks	4 weeks	8 weeks	
DTaP-Hib-IPV ∆	6 weeks	4 weeks	4 weeks	6 months
DTaP-IPVθ	4 years			6 months

- * For children who receive an all-IPV series, a fourth dose is not necessary if the third dose was administered at age 4 years or older.
- † The combined DTaP-HepB-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-HepB-IPV vaccine is approved for the primary series only (Doses 1-3). For adequate immune response, the last dose of hepatitis B vaccine should be given at ≥24 weeks of age and therefore this combination vaccine should not be administered as a complete primary series on an accelerated schedule at 4 week intervals for prevention of pertussis. The combined DTaP-HepB-IPV vaccine is not indicated for children >6 years of age.
- Δ The combined DTaP-Hib-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-Hib-IPV vaccine is approved for the primary series and first booster dose (Doses 1-4). The combined DTaP-Hib-IPV vaccine is not indicated for children 5 years of age and older.
- θ The combined DTaP-IPV vaccine may be used when any component of the combination is indicated, and if the other components are not contraindicated. The combined DTaP-IPV vaccine is approved for the booster dose at age 4-6 years.

Catch-Up Vaccination

The ACIP recommends catch-up vaccination of previously unvaccinated children and adolescents.

Recommended Dosages

Refer to product package inserts.

Contraindications and Precautions

The following conditions are contraindications to the administration of IPV vaccine:

1. Allergy to vaccine components

Persons who have had anaphylactic reactions to topically or systemically administered streptomycin, neomycin or polymyxin B should not receive IPV.

The following condition is a precaution to the administration of inactivated polio vaccine (IPV):

1. Moderate or severe illnesses with or without fever

2. Pregnancy

It is prudent on theoretical grounds to avoid vaccinating pregnant women with IPV vaccine. However, if immediate protection against poliomyelitis is needed, IPV may be administered.

Adopted and Effective: June 26, 2008

This document can be found on the CDC website at: http://www.cdc.gov/vaccines/programs/vfc/downloads/resolutions/0608polio.pdf