

# Injectable Vaccine Administration for Children 7-18 Years<sup>1</sup>

Vaccine	Age/Reminders	Route	Site <sup>2</sup>	Needle <sup>2</sup>	Contraindications <sup>3</sup>
Tetanus, diphtheria (Td)	May give more than 1 dose; For age 7 years and older	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component
Tetanus, diphtheria, pertussis (Tdap) <sup>4</sup>	Give as a single (one-time) dose; Routinely given at aged 11-12 years; Some children aged 7-10 yrs may a need dose	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component; encephalopathy within 7 days of previous pertussis vaccine without other known cause
Hepatitis B (hep B)	Last dose at/after age 6 months; No routine booster dose; No need to restart a valid series	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to a prior dose or component (baker's yeast)
Inactivated Polio Vaccine (IPV)	Give last dose at/after age 4 years; Need 6 months between next to last and last dose	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to a prior dose or component (neomycin, streptomycin, or polymyxin B)
		IM	Deltoid	1"-1.5" 22-25 g	
Measles, Mumps, Rubella (MMR)	1 <sup>st</sup> dose at/after age 12 months; 4 week minimum interval between two doses (all ages)	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to a prior dose or component (neomycin, gelatin); pregnancy
Varicella (Var)	1 <sup>st</sup> dose at/after age 12 months; 3 month interval between two doses (aged 12 months -12 years)	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to a prior dose or component (neomycin, gelatin); pregnancy
Inactivated Influenza (TIV)	Age 6 months and older; brand to use based on age	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to a prior dose or component
Hepatitis A (hep A)	1 <sup>st</sup> dose at/after age 12 months; 2 <sup>nd</sup> dose 6 months later	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component; hypersensitivity to alum (Havrix <sup>®</sup> : 2-phenoxyethanol)
Meningococcal Conjugate (MCV4) <sup>5</sup>	Routinely given at aged 11-12 years; Booster dose at age 16 years	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to a prior dose or component
Human Papillomavirus (HPV2 or HPV4)	HPV4 (Gardasil <sup>®</sup> ): females or males HPV2 (Cervarix <sup>®</sup> ): females only Both: for aged 9 through 26 years	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component; (HPV4: baker's yeast)

<sup>1</sup>Refer to Recommended Adolescent Immunization and Catch-up Schedules ([www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)) for further information

<sup>2</sup>Vaccines should never be administered in the buttocks; professional judgment is appropriate when selecting needle length

<sup>3</sup>See package insert for complete contraindication/component listing; may vary by brand

<sup>4</sup>Tdap brands: Boostrix<sup>®</sup> (GSK) is licensed for persons age 10 years and older; Adacel<sup>®</sup> (sanofi pasteur) is licensed for persons aged 11-64 years. Either brand may be used for persons aged 7 through 10 years and age 65 years and older when pertussis protection is needed. Refer to ACIP Recommendation for use of Tdap vaccines at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

<sup>5</sup>MCV4 Menveo<sup>®</sup> (Novartis) is licensed for aged 2 through 55 years and Menactra<sup>®</sup> (sanofi pasteur) is licensed for aged 9 months through 55 years.

# Injectable Vaccines for Selected Populations<sup>1</sup>

Vaccine	Recommendations for use and age	Route	Site <sup>2</sup>	Needle Length <sup>2</sup>	Contraindications <sup>3</sup>
Meningococcal Polysaccharide (MPSV4) <sup>5</sup>	For persons aged 2-55 years with a contraindication to MCV4 or For persons age 56 years and older	SC	Lateral Upper Arm	5/8" 23-25 g	Anaphylactic reaction to prior dose or component
Pneumococcal conjugate (PCV13)	Some children aged 5-18 years at increased risk for disease may need one dose	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component
Pneumococcal polysaccharide (PPSV23) <sup>6</sup>	Children age 2 years and older at high risk for disease; Given after completion of an age-appropriate PCV series; Minimum interval of 8 weeks between PCV and PPSV23	IM	Deltoid	1"-1.5" 22-25 g	Anaphylactic reaction to prior dose or component
		SC	Lateral Upper Arm	5/8" 23-25g	

<sup>1</sup>Refer to Recommended Adolescent Immunization and Catch-up Schedules ([www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)) for further information

<sup>2</sup>Vaccines should never be administered in the buttocks; professional judgment is appropriate when selecting needle length

<sup>3</sup>See package insert for complete contraindication/component listing; may vary by brand

<sup>4</sup>Tdap brands: Boostrix<sup>®</sup> (GSK) is licensed for persons age 10 years and older; Adacel<sup>®</sup> (sanofi pasteur) is licensed for persons aged 11-64 years. Either brand may be used for persons aged 7 through 10 years and age 65 years and older when pertussis protection is needed. Refer to ACIP Recommendation for use of Tdap vaccines at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

<sup>5</sup>MPSV4 Menomune<sup>®</sup> (sanofi pasteur) is licensed for age 2 yrs & older. MCV4 vaccine is preferred over Meningococcal polysaccharide (MPSV4) for persons aged 2 through 55 years. MCV4 Menveo<sup>®</sup> (Novartis) is licensed for aged 2 through 55 years and Menactra<sup>®</sup> (sanofi pasteur) is licensed for aged 9 months through 55 years. Refer to "A Quick Look at using Meningococcal Conjugant Vaccines (MCV4)" at [www.michigan.gov/immunize](http://www.michigan.gov/immunize) and ACIP Recommendations for use of Meningococcal Vaccines at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

<sup>6</sup>Refer to: PPSV23: Vaccination and Revaccination at [www.michigan.gov/immunize](http://www.michigan.gov/immunize) and ACIP Recommendations for use of Pneumococcal Polysaccharide Vaccine at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines) for risk groups and further vaccine information