

DTaP, Tdap, and Td Vaccine: Prevent Mistakes, Know Your Vaccine

Vaccine Type	Brand Names	Use for Ages	Use for Doses
DTaP (Diphtheria, Tetanus, and Pertussis)	DTaP (Daptacel®, Infanrix®) DTaP in combination vaccines: Pentacel®, Pediarix®, Kinrix®, Quadracel®, Vaxelis®	DTaP: 6 weeks through 6 years Pentacel (DTaP-IPV/Hib): 6 weeks through 4 years Pediarix (DTaP-IPV-HepB): 6 weeks through 6 years Kinrix and Quadracel (DTaP-IPV): 4 through 6 years Vaxelis (DTaP-IPV-Hib-HepB): 6 weeks through 4 years Do NOT give DTaP doses at/after 7 years	DTaP (5 dose series) at: 2, 4, 6, 15 to 18 months, and 4 to 6 years Pentacel: 1, 2, 3, or 4 of DTaP, IPV, and Hib Pediarix: 1, 2, or 3 of DTaP and IPV; any HepB dose except birth dose Kinrix: 5 th dose of DTaP, 4 th valid dose of IPV Quadracel: 5 th dose of DTaP, 4 th or 5 th valid dose of IPV Vaxelis: 1,2, or 3 of DTaP, IPV, and Hib, any HepB dose except birth dose
Tdap (Tetanus, diphtheria, and pertussis)	Tdap (Boostrix®, Adacel®)	Routinely given at 11 to 12 years of age Catch up ages 13 years and older 1 dose during every pregnancy, preferred during early part of gestational weeks 27 through 36 weeks	To ensure continued protection against tetanus and diphtheria, booster doses of either tetanus- and diphtheria-containing vaccines (Td or Tdap) should be administered every 10 years throughout life
Td (Tetanus, diphtheria)	Td (Tenivac®, TDVAX™)	7 years of age and older	

All Diphtheria-, Tetanus-, and Pertussis-containing vaccines are administered IM, including the combination vaccines.

DTaP:

- Children ages 2 months through 6 years should receive DTaP, not routinely recommended for use in those 7 years of age and older
- DTaP booster dose (age 15–18 months) may be given as early as 12 months of age as long as there is at least 6 months from the previous dose
- Infants should be no younger than 12 months of age when receiving dose 4
- Dose 5 should not be given younger than 4 years of age; dose 5 is not necessary if dose 4 was given on or after 4 years of age
- When used in combination with Pentacel (DTaP-IPV/Hib), Kinrix may be used for the 5th (4th valid) dose of the IPV series
- Recommended not to give more than 6 doses of diphtheria- and tetanus-containing vaccines before the 7th birthday due to concerns about increased local reactions; only documented doses count toward the maximum of 6 doses
- Vaxelis: **Do Not Use** for 4th or 5th dose of DTaP or 4th dose of IPV, or booster dose of Hib; **Do Not Use** for children aged 5 years and older
- Pentacel: **Do Not Use** for 5th dose of DTaP, or if needed, 5th dose of IPV; **Do Not Use** for children aged 5 years and older
- Pediarix: **Do Not Use** for 4th or 5th dose of DTaP or 4th dose of IPV; **Do Not Use** for children aged 7 years and older

Tdap:

- Persons aged 7 years and older who do not have a primary vaccination series for tetanus, diphtheria, and pertussis^{1,2,3}: Administer 1 Tdap dose as part of the catch-up series (preferably the first dose); if additional doses are needed, use Td or Tdap
Minimum interval between doses: 1 to 2: 4 weeks; 2 to 3: varies*; 3 to 4: 6 months**
 - The 3-dose schedule is a dose of Tdap (preferably the first dose), followed by a dose of Td or Tdap at least 4 weeks after and another dose of Td or Tdap 6 to 12 months later
- Women who did not receive Tdap at any time prior to or during pregnancy should receive it immediately postpartum

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- Tdap can be given with no minimum interval since the last tetanus or diphtheria toxoid-containing vaccine
- * 4 weeks if 1st dose given was at less than 12 months of age or 6 months if 1st dose given at 12 months of age or older
- **4th dose is only given if DTaP/DT was administered before the first birthday

Td:

- Use Td for persons with a valid contraindication to previous dose of pertussis vaccine

Further points:

- DTaP has approximately 3-5 times as much of the diphtheria component than what is in Tdap and Td, this is indicated by an upper-case "D"; the amount of tetanus toxoid in each of the products is equivalent, so it remains an upper-case "T"
- For Pentacel vaccine be sure to **reconstitute** the Hib vial with DTaP-IPV vial before administration; ONLY use diluent supplied by manufacturer
- For children and adults who fall behind in completion of their vaccine series, there is no need to restart the series; resume where they've left off
- Adults and adolescents who have received Tdap should be given Tdap or Td as their subsequent 10-year booster doses
- Patients with a history of pertussis should still receive DTaP or Tdap according to routine recommendations
- In 2023, Sanofi Pasteur, stopped manufacturing the diphtheria and tetanus toxoids absorbed vaccine, commonly known as DT
- DTP is no longer available in the U.S. but may be counted towards series completion on historical immunization records
- Tetanus Toxoid (TT) does **not** count towards a diphtheria-, tetanus-, and pertussis-containing vaccine series
- To reduce medical errors, store similar vaccines apart from each other and label with name, age, and private or VFC stock (DTaP, Tdap, Td)
- DTaP and Tdap inadvertently given is a medical error:
 - DTaP inadvertently given to a fully vaccinated or undervaccinated child aged 7-9 years, may count as a Tdap dose in the catch-up series; Routine Tdap dose at age 11-12 years should be administered
 - DTaP inadvertently given at 10 years and older should count as the adolescent Tdap dose
 - Persons aged 7-9 years who receive Tdap as part of the catch-up series or inadvertently should receive the routine Tdap dose at age 11-12 years
 - Persons aged 10 years who receive Tdap do not need to receive the routine Tdap dose at age 11-12 years
 - Tdap given to a child younger than age 7 years as dose 1, 2, or 3 of the DTaP series is invalid; repeat DTaP as soon as possible
 - Tdap given to a child younger than age 7 years as dose 4 or 5 of the DTaP series can be counted as valid; give Tdap routinely at age 11-12
- Since DTaP and pneumococcal conjugate (PCV) are the vaccines most likely to cause a local reaction, it is prudent to give in separate limbs if possible
- Since Tdap and Meningococcal are the vaccines most likely to cause a local reaction, it is prudent to give in separate limbs if possible
- For guidance on vaccinating post-hematopoietic cell transplant (HCT) with Tdap, Td, and DTaP, review the section Altered Immunocompetence in the General Best Practice Guidelines for Immunization at www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html
- For further guidance, refer to the MDHHS Quick Look references for diphtheria-, tetanus-, and pertussis-containing vaccines at: www.michigan.gov/vaccinequicklooks and for current DTaP/Tdap/Td recommendations visit www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/dtap.html

¹A complete DTaP series is 5 doses or 4 doses with 1 dose at/after age 4 years that meet minimum age/interval recommendations.

²Number of doses needed to complete the series depends on age at the 1st dose: If 1st dose given less than 12 months, 4 doses are recommended, BUT if 1st dose given at 12 months or older, 3 doses are recommended with the final dose 6 months from the previous dose

³Catch-up Schedule for Children and Adolescents: <https://www.cdc.gov/vaccines/schedules/hcp/imz/catchup.html>