



Australian Government
Medicare Australia

Australian childhood
immunisation
register

Australian Childhood Immunisation Register

National Due and Overdue Rules for Childhood Immunisation

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Abbreviations

ACIR	Australian Childhood Immunisation Register
ASVS	Australian Standard Vaccination Schedule
DTPa	Diphtheria, tetanus, acellular pertussis vaccine
HepB	Hepatitis B
Hib	<i>Haemophilus influenzae</i> type B
NHMRC	National Health and Medical Research Council
NIP	National Immunisation Program
The Handbook	Australian Immunisation Handbook

Definitions

Antigen component

Part of the vaccine to which an immune response is directed.

Birth dose

A dose of hepatitis B vaccine given between birth and seven days of age.

Combination vaccine

A vaccine that contains antigen components of more than one disease.

Handbook

The NHMRC approved Australian Immunisation Handbook (latest edition).

Hib-schedule A

A primary course of three Hib doses due at two, four and six months, followed by a booster at 12 months.

Hib-schedule B

A primary course of two Hib doses due at two and four months, followed by a booster at 12 months.

Immunisation

The process of inducing immunity to a disease, caused by an infectious agent, through the administration of a vaccine.

Immunisation status

The result of immunisation information for a particular child being forwarded to, and processed by, the ACIR. Determination of immunisation status is undertaken at the disease level in a process that calculates the specific diseases each child is required to be vaccinated against.

Individual age-based schedule

The standard ages given for immunisation according to the ASVS and the NIP Schedule.

Routine schedule

The vaccines provided under the NIP Schedule.

Rejected dose

A dose that is not administered according to the National Due and Overdue Rules.

Valid dose

A dose that is administered according to the National Due and Overdue Rules.

Overview

The Australian Childhood Immunisation Register

From 1 January 1996, the Australian Childhood Immunisation Register (the ACIR) began recording details of vaccinations given to children under the age of seven years who live in Australia.

The ACIR is the national immunisation database administered by Medicare Australia that provides a facility to assist health professionals increase childhood immunisation rates. It also provides useful information to parents about the immunisation details recorded for their child or children.

The ACIR reports immunisation coverage at national, state and local levels (including individual service provider), identifying areas with low immunisation to assist health planning programs.

The National Immunisation Program

The National Immunisation Program (NIP) is an Australian, State and Territory Governments initiative. It provides free vaccine to the Australian community to protect against major vaccine preventable diseases.

The NIP Schedule describes which diseases are vaccinated against at which ages. The ACIR aligns with the NIP Schedule—children are assessed as due or overdue for immunisation according to the vaccines provided under the NIP.

A copy of the current NIP Schedule is shown on page 5.

The Australian Immunisation Handbook

The National Health and Medical Research Council's (NHMRC) Australian Immunisation Handbook (the Handbook) provides detailed information for immunisation providers on available vaccine choices and the administration of vaccines.

The Australian Standard Vaccination Schedule (ASVS) contained in the Handbook stands separately from the NIP Schedule.

The National Due and Overdue Rules for Childhood Immunisation

The ACIR National Due and Overdue Rules for Childhood Immunisation are derived from the Handbook and are made available to help providers better understand the operations of the ACIR. Providers should always use the Handbook to guide decision making about immunisations.

Consideration of vaccine by antigen component

The National Due and Overdue Rules for Childhood Immunisation are used by the ACIR to determine the immunisation status for a child. The immunisation status is the result of immunisation information forwarded to, and processed by, the ACIR. When the ACIR receives notification of a vaccination, the vaccine brand name or vaccine description is used to identify the antigen component/s of the vaccine.

Determination of a child's immunisation status is undertaken at the antigen level in a process that calculates the specific diseases each child is required to be vaccinated against, as determined by the NIP Schedule. This process identifies the child's applicable vaccination schedule according to their date of birth, valid vaccinations recorded, and the presence of any records of medical contraindication or natural immunity.

The due and overdue concept

Each applicable antigen component of an individual age-based schedule is identified. A child's immunisation status is assessed using the detailed rules against each antigen required for an age-based schedule. On the basis of immunisation information forwarded to the ACIR, an assessment is made to determine at a given time if a child is due, not due or overdue for immunisation.

For example, a child is three months of age and the ACIR has received information that dose one of diphtheria, tetanus, pertussis, polio, pneumococcal, Hib and hepatitis B was given at two months of age. For the two month age schedule, this child is assessed as 'not due' for immunisation. For the four month age schedule, this child is identified as being 'due' for immunisation two months after the date of dose one, and overdue three months after the date of dose one.

General outline of the rules

- A dose is never due or overdue when a later dose has been given. For example, dose one can never be due or overdue if dose two has been given.
- Certain rules are applied when giving primary, booster or catch up vaccinations— these are described in the Handbook. The National Due and Overdue Rules include an administrative interpretation of some clinical rules derived from the Handbook. For example, to determine the immunisation status on the ACIR, certain vaccines or components of vaccines are considered to be equivalent in these rules. When they are not considered equivalent, individual schedules apply, such as for Hib and Rotavirus.
- With the exceptions noted in the following paragraph, for the purpose of these rules, all components of vaccines against the same disease are considered equivalent regardless of the source of the vaccine. For example, the diphtheria, tetanus or pertussis components may be contained within 'Infanrix' or 'Tripacel' (brands of diphtheria, tetanus and acellular pertussis vaccine).
- Different Hib vaccines require different pathways. The pathway followed depends on which Hib vaccine is used. Similarly, different Rotavirus vaccines require different pathways. For clinical reasons, the Handbook recommends that the Hib or Rotavirus course is completed with the same vaccine with which it was commenced. However there will be occasions when interchanging between pathways occurs (see the general notes and detailed rules for each antigen for more information)..
- While different hepatitis B vaccines follow different product schedules, the due and overdue rule requirements for hepatitis B are the same.
- In general, extra doses are not accepted by the ACIR. For example, a notification of dose four of hepatitis B would be rejected. The exception occurs when a combination vaccine is used to bring the child up to date with one of its components (even though the child has reached the maximum count for one or more of the remaining components). For example, a child may have had a hepatitis B vaccine to bring the hepatitis B dose count to three. A later notification of administration of Infanrix-HepB would be accepted, even though the hepatitis B count is now four, and higher than the number of doses required. Note that this is an administrative convenience and does not imply that such an action is clinically appropriate.

Timing issues

- ☑ There must be an interval of at least 27 days between successive doses of the same antigen vaccination, for example, between dose one and dose two of a vaccine containing diphtheria. In some cases (see detailed rules for each antigen) this interval is required to be longer, or there is a minimum age at which a particular dose can be given.
- ☑ With the exception of the hepatitis B vaccine, no vaccine on the NIP Schedule may be given before the child reaches one month of age.
- ☑ For a birth dose of hepatitis B vaccine to be considered valid, it must be given between birth and seven days of age.
- ☑ The minimum age requirement for the first dose of the combination measles, mumps, rubella vaccine is six months. While a child would not usually begin immunisation against measles before 12 months of age, this requirement is in place to cater for special circumstances as described in the Handbook.

National Immunisation Program Schedule, Australia

(Valid from 1 January 2008)

Age	Vaccine
Birth	Hepatitis B
2 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b Hepatitis B Inactivated poliomyelitis Pneumococcal conjugate (refer to note 1) Rotavirus (refer to note 2a)
4 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b Hepatitis B Inactivated poliomyelitis Pneumococcal conjugate Rotavirus
6 months	Diphtheria, tetanus and acellular pertussis <i>Haemophilus influenzae</i> type b (refer to note 3) Hepatitis B – or at 12 months Inactivated poliomyelitis Pneumococcal conjugate Rotavirus (refer to note 2b)
12 months	Measles, mumps and rubella Hepatitis B – or at 6 months <i>Haemophilus influenzae</i> type b Meningococcal C conjugate (refer to note 4)
18 months	Varicella (refer to note 5)
4 years	Diphtheria, tetanus and acellular pertussis Inactivated poliomyelitis Measles, mumps and rubella

Note:

1. Applies to children born from 1 January 2005.
- 2a. Applies to children born from 1 May 2007.
- 2b. Three doses of Rotavirus vaccine (at two, four and six months) are required if using RotaTeq vaccine.
3. Four doses of Hib vaccine (at two, four, six and 12 months) are required if using PRP-T Hib containing vaccines.
4. Applies to children born from 1 January 2002.
5. Applies to children born from 1 May 2004.

Vaccines included in the NIP Schedule

Vaccine brand name	Disease components	Product schedule
Infanrix Hexa	Diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis, Hib	2, 4 and 6 months (Hib pathway A)
Infanrix Penta	Diphtheria, tetanus, pertussis, hepatitis B, poliomyelitis	2, 4 and 6 months
Pediacel	Diphtheria, tetanus, pertussis, poliomyelitis, Hib	2, 4 and 6 months (Hib pathway A)
Poliacel	Diphtheria, tetanus, pertussis, poliomyelitis, Hib	2, 4 and 6 months (Hib pathway A)
Infanrix-IPV	Diphtheria, tetanus, pertussis, poliomyelitis	2, 4, 6 months and 4 years
Quadracel	Diphtheria, tetanus, pertussis, poliomyelitis	2, 4, 6 months and 4 years
Infanrix-HepB	Diphtheria, tetanus, pertussis, hepatitis B	2, 4, 6 months and 4 years
Tripacel	Diphtheria, tetanus, pertussis	2, 4, 6 months and 4 years
Infanrix	Diphtheria, tetanus, pertussis	2, 4, 6 months and 4 years
ActHib	Hib	2, 4, 6, 12 months (Hib pathway A)
HibTITER	Hib	2, 4, 6, 12 months (Hib pathway A)
Hiberix	Hib	2, 4, 6, 12 months (Hib pathway A)
Comvax	Hib, hepatitis B	2, 4, 12 months (Hib pathway B)
PedvaxHIB	Hib	2, 4, 12 months (Hib pathway B)
Engerix B	Hepatitis B	Birth dose
HBVAX II	Hepatitis B	Birth dose
IPOL	Poliomyelitis (IPV)	2, 4, 6 months and 4 years
Polio Sabin	Poliomyelitis (OPV)	2, 4, 6 months and 4 years
MMRII	Measles, mumps, rubella	12 months and 4 years
Priorix	Measles, mumps, rubella	12 months and 4 years
Meningitec	Meningococcal C (conjugate)	12 months
Menjugate	Meningococcal C (conjugate)	12 months
NeisVac-C	Meningococcal C (conjugate)	12 months
Prevenar	Invasive pneumococcal disease (conjugate)	2, 4, 6 months
Pneumovax23	Invasive pneumococcal disease (polysaccharide)	18 months onwards
Varilrix	Varicella Zoster (Chickenpox)	18 months
Varivax	Varicella Zoster (Chickenpox)	18 months
Rotarix	Rotavirus	2 and 4 months (Rotavirus pathway A)
RotaTeq	Rotavirus	2, 4 and 6 months (Rotavirus pathway B)

Diphtheria—detailed rules

Dose one

Where doses one, two, three or four of a diphtheria vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two, three or four of a diphtheria vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

Where doses three or four of a diphtheria vaccine have not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

Dose four

Where dose four of a diphtheria vaccine has not been given and the date of dose three is before the child reaches three years and six months of age, dose four is due when the child reaches four years of age, and is overdue when the child reaches four years and one month of age.

Where dose four of a diphtheria vaccine has not been given and the date of dose three is after the child reaches three years and six months of age, dose four is due six months after the date of dose three, and is overdue seven months after the date of dose three.

An interval of at least six months must occur between giving dose three and dose four.

Haemophilus influenzae type B (Hib)—general notes

Hib pathway A is a primary course of three doses due at two, four and six months, followed by a booster at 12 months. Examples of current vaccine brands that follow pathway A are Infanrix Hexa, Pediacel, Poliacel, Hiberix, HibTITER and ActHIB.

Hib pathway B is a primary course of two doses due at two and four months, followed by a booster at 12 months. Examples of current vaccine brands that follow pathway B are PedvaxHIB and Comvax.

Hib primary vaccination

For primary vaccination, if the child receives **any** dose of a Hib pathway A vaccine, then the three dose course for pathway A must be followed rather than the two dose course for pathway B (although vaccines from either the Hib pathway A or Hib pathway B series are interchangeable and either may be used).

Hib booster

For booster doses and in children over 15 months of age, regardless of previous Hib vaccinations, a single dose of any registered Hib vaccine is sufficient for protection.

No Hib vaccine is due or overdue after the child reaches five years of age.

Haemophilus influenzae type B (Hib)—detailed rules

Hib pathway A—primary course at two, four and six months followed by a booster at 12 months

Dose one

Where doses one, two, three or four of a Hib vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two, three or four of a Hib vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

If the date of dose one is after the child reaches 15 months of age, then no further doses are required.

Dose three

Where doses three or four of a Hib vaccine have not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

If the date of dose one is after the child reaches 12 months of age, then dose three is not required.

If the date of dose two is after the child reaches 15 months of age, then no further doses are required.

Dose four

Where dose four of a Hib vaccine has not been given, dose four is due at 12 months of age, and is overdue at 13 months of age.

If the date of dose one is after the child reaches seven months of age, then dose four is not required.

If the date of dose three is after the child reaches 15 months of age, then dose four is not required.

An interval of at least two months must occur between doses three and four.

Dose four must not be given before the child reaches 11 months of age.

Haemophilus influenzae type B (Hib)—detailed rules

Hib pathway B—primary course at two and four months followed by a booster at 12 months

Dose one

Where doses one, two or three of a Hib vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two or three of a Hib vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

If the date of dose one is after the child reaches 15 months of age, then no further doses are required.

Dose three

Where dose three of a Hib vaccine has not been given, dose three is due at 12 months of age or two months after the date of dose two, whichever is the later, and is overdue at 13 months of age or three months after the date of dose two, whichever is the later.

If the date of dose one is after the child reaches 12 months of age, then dose three is not required.

If the date of dose two is after the child reaches 15 months of age, then dose three is not required.

An interval of at least two months must occur between doses two and three.

Dose three must not be given before the child reaches 11 months of age.

Hepatitis B—general notes

Hepatitis B is not due or overdue after the child has received three valid doses. Three doses of a hepatitis B vaccine, which excludes a birth dose, are sufficient to deem a child 'immunised for' hepatitis B.

The standard schedule for hepatitis B vaccine, with or without a birth dose, is:

- dose one—due at two months of age and overdue at three months
- dose two—due at four months of age and overdue at five months
- dose three—due at six months of age and overdue at 13 months.

Note the timing between the due and overdue requirements for dose three. This is to cater for different hepatitis B vaccine products that follow different product schedules. For the purpose of these rules, hepatitis B vaccine products are interchangeable.

Hepatitis B—birth dose rules

A dose of hepatitis B vaccine given between birth and seven days of age is considered to be the birth dose.

A dose of hepatitis B vaccine reported as the birth dose, given between eight days and one month of age, will be recorded dose one given early.

Hepatitis B—detailed rules

Dose one

Where doses one, two or three of a hepatitis B vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two or three of a hepatitis B vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

Where dose three of a hepatitis B vaccine has not been given, dose three is due at six months of age or two months after the date of dose two, whichever is the later, and is overdue at 13 months of age or three months after the date of dose two, whichever is the later.

Measles—detailed rules

A dose before 12 months of age is given only in special circumstances as described in the Handbook.

Dose one

Where doses one, two or three of a measles vaccine have not been given, dose one is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Dose two

Where doses two or three of a measles vaccine have not been given:

- If the date of dose one is before the child reaches 11 months of age, then dose two is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.
- If the date of dose one is after the child reaches 11 months of age, then dose two is due when the child reaches four years of age or one month after the date of dose one, whichever is later, and is overdue when the child reaches four years and one month of age, or two months after the date of dose one, whichever is later.

Dose three

Where dose three of a measles vaccine has not been given:

- If the date of dose one is after the child reaches 11 months of age, then dose three is not required
- If the date of dose one is before the child reaches 11 months of age, then dose three is due when the child reaches four years of age, or one month after the date of dose two, whichever is later, and is overdue when the child reaches four years and one month of age or two months after the date of dose two, whichever is later.

Meningococcal C—detailed rules

For children born from 1 January 2002:

No dose of meningococcal C is valid before the child reaches six weeks of age.

Dose one

Where doses one, two or three of a conjugate meningococcal C vaccine have not been given, dose one is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Dose two

If the date of dose one is after the child reaches 11 months of age, then dose two is not required.

Where doses two or three of a conjugate meningococcal C vaccine have not been given, if the date of dose one is before the child reaches four months of age, then dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Where doses two or three of a conjugate meningococcal C vaccine have not been given, if the date of dose one is after the child reaches four months of age, then dose two is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Dose three

If the date of dose one is after the child reaches four months of age, then dose three is not required.

If the date of dose two is after the child reaches 11 months of age, then dose three is not required.

Where dose three of a conjugate meningococcal C vaccine has not been given, if the date of dose one is before the child reaches four months of age, then dose three is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Mumps—detailed rules

Dose one

Where doses one, two or three of a mumps vaccine have not been given, dose one is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Dose two

Where doses two or three of a mumps vaccine have not been given:

- If the date of dose one is before the child reaches 11 months of age, then dose two is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.
- If the date of dose one is after the child reaches 11 months of age, then dose two is due when the child reaches four years of age or one month after the date of dose one, whichever is later, and is overdue when the child reaches four years and one month of age or two months after the date of dose one, whichever is later.

Dose three

Where dose three of a mumps vaccine has not been given:

- If the date of dose one is after the child reaches 11 months of age, then dose three is not required.
- If the date of dose one is before the child reaches 11 months of age, then dose three is due when the child reaches four years of age or one month after the date of dose two, whichever is later, and is overdue when the child reaches four years and one month of age or two months after the date of dose two, whichever is later.

Pertussis—detailed rules

Dose one

Where doses one, two, three or four of a pertussis vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two, three or four of a pertussis vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

Where doses three or four of a pertussis vaccine have not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

Dose four

Where dose four of a pertussis vaccine has not been given and the date of dose three is before the child reaches three years and six months of age, dose four is due when the child reaches four years of age, and is overdue when the child reaches four years and one month of age.

Where dose four of a pertussis vaccine has not been given and the date of dose three is after the child reaches three years and six months of age, dose four is due six months after the date of dose three, and is overdue seven months after the date of dose three.

An interval of at least six months must occur between giving dose three and dose four.

Pneumococcal (7vPCV schedule)—detailed rules

For children born from 1 January 2005:

Dose one

Where doses one, two or three of conjugate pneumococcal vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two or three of conjugate pneumococcal vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

If the date of dose one is after the child reaches 17 months of age, then no further doses are required.

Dose three

Where dose three of conjugate pneumococcal vaccine has not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

If the date of dose one is after the child reaches the seven months of age, then dose three is not required.

If the date of dose two is after the child reaches 12 months of age, then dose three is not required.

No conjugate pneumococcal vaccine is due or overdue after the child reaches two years of age.

Poliomyelitis—detailed rules

Dose one

Where doses one, two, three or four of a poliomyelitis vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two, three or four of a poliomyelitis vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

Where doses three or four of a poliomyelitis vaccine have not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

Dose four

Where dose four of a poliomyelitis vaccine has not been given and the date of dose three is before the child reaches three years of age, dose four is due when the child reaches four years of age, and is overdue when the child reaches four years and one month of age.

Where dose four of a poliomyelitis vaccine has not been given and the date of dose three is between three and four years of age, dose four is due six months after the date of dose three, and is overdue seven months after the date of dose three.

If the date of dose three is after the child reaches four years of age, then dose four is not required.

Rotavirus—general notes

No dose of a Rotavirus vaccine is valid if given before the child reaches six weeks of age.

There must be a minimum of 28 days between successive doses.

Rotavirus pathway A is a course of two doses of **Rotarix** due at two and four months. Where pathway A is followed, no dose of Rotarix is due or overdue after the child reaches 24 weeks of age.

Rotavirus pathway B is a course of three doses of **RotaTeq** due at two, four and six months. Where pathway B is followed, no dose of RotaTeq is due or overdue after the child reaches 32 weeks of age.

Interchangeability of vaccines

Completion of a vaccination course should be with a rotavirus vaccine from the same manufacturer where possible. There are no studies that address the interchangeability of the two available rotavirus vaccines. However, if either dose one or two of rotavirus vaccine is given as RotaTeq, a third dose of rotavirus vaccine should be given, as long as the upper age limit and inter-vaccine interval (as defined above) are met.

Rotavirus—detailed rules

For children born from 1 May 2007:

Rotavirus pathway A—Rotarix

Dose one

Where doses one or two of Rotarix vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

If the date of dose one is after the child reaches 20 weeks of age, then dose two is not required.

Where dose two of Rotarix vaccine has not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Rotavirus pathway B—RotaTeq

Dose one

Where doses one, two or three of RotaTeq vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

If the date of dose one is after the child reaches 28 weeks of age, then no further doses are required.

Where doses two or three of RotaTeq vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

If the date of dose one is after the child reaches 24 weeks of age, then dose three is not required.

If the date of dose two is after the child reaches 28 weeks of age, then dose three is not required.

Where dose three of RotaTeq vaccine has not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

Rubella—detailed rules

Dose one

Where doses one, two or three of a rubella vaccine have not been given, dose one is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.

Dose two

Where doses two or three of a rubella vaccine have not been given:

- If the date of dose one is before the child reaches 11 months of age, then dose two is due when the child reaches 12 months of age, and is overdue when the child reaches 13 months of age.
- If the date of dose one is after the child reaches 11 months of age, then dose two is due when the child reaches four years of age or one month after the date of dose one, whichever is later, and is overdue when the child reaches four years and one month of age or two months after the date of dose one, whichever is later.

Dose three

Where dose three of a rubella vaccine has not been given:

- If the date of dose one is after the child reaches 11 months of age, then dose three is not required.
- If the date of dose one is before the child reaches 11 months of age, then dose three is due when the child reaches four years of age or one month after the date of dose two, whichever is later, and is overdue when the child reaches four years and one month of age or two months after the date of dose two, whichever is later.

Tetanus—detailed rules

Dose one

Where doses one, two, three or four of a tetanus vaccine have not been given, dose one is due when the child reaches two months of age, and is overdue when the child reaches three months of age.

Dose two

Where doses two, three or four of a tetanus vaccine have not been given, dose two is due two months after the date of dose one, and is overdue three months after the date of dose one.

Dose three

Where doses three or four of a tetanus vaccine have not been given, dose three is due two months after the date of dose two, and is overdue three months after the date of dose two.

Dose four

Where dose four of a tetanus vaccine has not been given and the date of dose three is before the child reaches three years and six months of age, dose four is due when the child reaches four years of age, and is overdue when the child reaches four years and one month of age.

Where dose four of a tetanus vaccine has not been given and the date of dose three is after the child reaches three years and six months of age, dose four is due six months after the date of dose three, and is overdue seven months after the date of dose three.

An interval of at least six months must occur between giving dose three and dose four.

Varicella—detailed rules

For children born from 1 May 2004:

Dose one

Where a dose of varicella vaccine has not been given, dose one is due when the child reaches 18 months of age, and is overdue when the child reaches 19 months of age.