

Immunization & Health Record



• Step by step protection against childhood infections is what the child needs. Follow the steps of vaccinations. •

Name: Blo. Divya

Date of Birth: 3/8/18 Time of Birth: 5:32 Am Sex: Boy

Name of the Mother: Mrs. Divya

Name of the Father: Mr. Bharath

Address: NO: 12, 9th Street, Vaishnavi Nagar

Thirumalai Vayal.

Delivery: Normal / Vacuum / Forceps / Caesarean

Maternal Status:

Weight: 2.3kg Length: Head circumference: Blood Group: A (+ve)

Remarks:

Immunization Time Table 2016¹

AGE	VACCINE	DUE ON	GIVEN ON	BATCH	WEIGHT	HEIGHT	HEAD CIRCUMFERENCE
1 weeks	BCG ^a		14/8/18		2.5kg		
	OPV 0 ^a						
	Hep-B 1 ^a						
	DTwP 1		12/9/18	Hexat			
	IPV 1						
2 weeks	Hep-B 2						
	Hib 1			Rota	4.1kg		36.3cm
	Rotavirus 1				5.7kg		38.8cm
	PCV 1		31/10/18	Hexat			
	DTwP 2		12/10/18	Hexat			
3 weeks	IPV 2						
	Hib 2			Rota	5.3kg		38.1cm
	Rotavirus 2						
	PCV 2						
	DTwP 3						
4 weeks	IPV 3						
	Hib 3						
	Rotavirus 3						
	PCV 3						
	OPV 1						
5 months	Hep-B 3 ^a						
	OPV 2						
6 months	MMR-1 ^b						
	Enteroshield [™] Polysaccharide Conjugate Vaccine						
7 months	A 1 ^c						
	A 2 ^c						
	Typhoid booster						
18 months	DTwP B1/DTaP ^m						
	B1 IPV B1						
	Hib B1						
24 months	Hep-A 2 ⁿ						
	Booster of Typhoid Conjugate Vaccine ^o						
6 years	DTwP B2/DTaP B2						
	OPV 3						
	Varicella 2 ^p						
	MMR 3 ^q						
12 years	Tdap/Td ^r						
	HPV ^s						

These vaccines to all newborns before hospital discharge.
 a. BCG combinations should preferably be avoided for the primary series.
 b. MMR combinations should be preferred in certain specific circumstances/conditions only.
 c. For girls 15 years and above, and immunocompromised individuals 3 doses are recommended.
 d. For 3-dose schedule, the minimum interval between doses should be 6 months.
 e. For 2-dose schedule, the doses can be administered at 0, 1-2 (depending on brand) and 6 months.
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1. Rotavirus:
 - Only 2 doses of RV1 are recommended.
 - If RV1 is chosen, the 2nd dose should be given at 14 weeks.
 g. Hepatitis-B:
 - The final (3rd or 4th) dose in the HepB vaccine series should be administered no earlier than age 24 weeks and at least 16 weeks after the first dose.
 h. MMR:
 - Measles-containing vaccine ideally should not be administered before completing 270 days or 9 months of life.
 - The 2nd dose must follow in 2nd year of life;
 - No need to give stand-alone measles vaccine.
 i. Typhoid:
 - Currently, two typhoid conjugate vaccines, Typhoid-TCV^o and Polatyp^h available in Indian market; either can be used.
 - An interval of at least 4 weeks with the MMR vaccine should be maintained while

k. MMR:
 - The 2nd dose must follow in 2nd year of life.
 - However, it can be given at anytime 4-6 weeks after the 1st dose.
 l. Varicella:
 - The risk of breakthrough varicella is lower if given 15 months onwards.
 m. The first booster (1st dose) may be administered as early as age 12 months, provided at least 6 months have elapsed since the third dose.
 n. Hepatitis A: 2nd dose for inactivated vaccines only.
 o. Typhoid:
 - 1st & 2nd boosters should preferably be of DTwP.
 - Considering a higher reactivity of DTwP, DtaP can be considered for the boosters.
 p. Typhoid:
 - A booster dose of Typhoid conjugate vaccine (TCV), if primary dose is given at 9-12 months.
 - A dose of Typhoid VI-polysaccharide (VI-PS) vaccine can be given if conjugate vaccine is not available or feasible.

c. Tdap:
 - Tdap is preferred to Td followed by Td every 10 years.
 d. HPV:
 - Only 2 doses of either of the two HPV vaccines for adolescent/prepubertal girls aged 9-14 years.
 - For girls 15 years and above, and immunocompromised individuals 3 doses are recommended.
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