

## **7.0 Nunavut Childhood and Adult Immunization Schedules and Catch-up Aids**

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## **7:0 Nunavut Immunization Schedule and Catch-up Aid**

### **7.1 Introduction**

Nunavut will be doing a schedule review in the near future. In this Manual the immunization schedules currently in used are included. If in your daily practice you come across children or adults who don't fit in any of the enclosed immunization schedules, please consult with your Regional Communicable Disease Coordinator for guidance.



## Nunavut Immunization Schedule for Unimmunized and Under-immunized Adults $\geq$ 19 Years

Some adults may present without any documented immunizations. An attempt should be made to obtain immunization records from their previous health center or community. If records are unavailable, the individual should be considered unimmunized. Routine serological testing for immunity is not routinely recommended.

Some adults may present with records that show they are partially immunized. If partially immunized, give recommended vaccines to complete series as scheduled below. Consult RCDC for catch-up immunization scheduling.

Vaccine	1 <sup>st</sup> Visit	2 <sup>nd</sup> Visit (1 month after 1 <sup>st</sup> Visit)	3 <sup>rd</sup> Visit (2 months after 1 <sup>st</sup> Visit)	4 <sup>th</sup> Visit (6 months after 1 <sup>st</sup> Visit)	5 <sup>th</sup> Visit (6-12 months after 3 <sup>rd</sup> Visit)	Every 10 Years after 4 <sup>th</sup> Visit
Tetanus, Diphtheria, Pertussis, Polio (Tdap-IPV) <sup>1</sup>	✓					
Tetanus, Diphtheria, Polio <sup>2</sup>			✓		✓	
Tetanus, Diphtheria (Td)						✓
Measles, Mumps, Rubella (MMR) <sup>3</sup>	✓	✓				
Hepatitis B <sup>4</sup>	✓	✓		✓		

1. If Tdap-IPV vaccine unavailable give Tdap vaccine and IPV separately.
2. Give Td vaccine and IPV separately.
3. 2 doses of MMR vaccine (maximum) are recommended for all adults born in or after 1970. Refer to MMR protocol for guidelines on giving MMR to adults born before 1970.
4. 3 doses series recommended for select high-risk adults. Refer to Hepatitis B Immunization Protocol for eligibility and dose series guidelines.



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# Nunavut Routine Adult Immunization Schedule

Vaccine	Age Group		
	19 – 24 Years	25 – 49 Years	≥ 50 Years
Influenza <sup>1</sup>	1 dose recommended yearly.		
Meningococcal-C-ACYW <sup>2</sup>	See guidelines below		
Tetanus, Diphtheria (Td) <sup>3</sup>	1 booster dose recommended every 10 years throughout adulthood.		
Varicella <sup>4</sup>	See guidelines below and review Varicella Immunization Protocol		
Pneumococcal Polysaccharide (Pneu-P-23) <sup>5</sup>			See guidelines below
Hepatitis B Vaccine <sup>6</sup>	3 doses series recommended for select high-risk adults		

1. Follow annual influenza guidelines.
2. If not previously vaccinated with meningococcal vaccine in adolescence (including previous vaccination with Meningococcal C vaccine) 1 dose is recommended for students or athletes <25 years of age. Review immunization protocol for high-risk eligibility.
3. 1 dose in adulthood should include Acellular Pertussis (Tdap).
4. 2 doses at least 6 weeks apart. Recommended for susceptible (non-immune) health care workers and women who test negative for varicella antibodies at prenatal screen (to be given in postpartum period).
5. 1 dose recommended to all adults in this age group. 1 additional booster dose recommended 5 years later for select high-risk adults. Refer to Pneumococcal Polysaccharide 23-valent (Pneu-P-23) immunization protocol for high-risk eligibility. Maximum number of doses is 2.
6. 3 dose series recommended for select high-risk adults. Refer to Hepatitis B Immunization Protocol for eligibility and dose series guidelines.



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## Nunavut Immunization Catch-up Aid for Children Up to 18 Years of Age

For use when a child starts an immunization series at a later date, or falls behind the routine schedule by  $\geq 1$  month

**Consult RCDC for catch-up immunization scheduling.**

Vaccine	Minimum age for dose 1	Maximum age	Current age of Child	# of Prior Doses	# of Doses Due	Minimum Interval Between Doses			Additional Comments
						Dose 1 to dose 2	Dose 2 to dose 3	Dose 3 to dose 4	
Bacille Calmette Guerin (BCG)	Birth	<1 year							Refer to BCG protocol for TST recommendations
Hepatitis B	Birth	18 years	0 through 18 years	0 or unknown	3	4 weeks	8 weeks, and at least 16 weeks after 1 <sup>st</sup> dose		The minimum age for dose #3 is 6 months  Standard dose is 0.5ml regardless of product.
				1	2	4 weeks	8 weeks, and at least 16 weeks after 1 <sup>st</sup> dose		
				2	1		8 weeks, and at least 16 weeks after 1 <sup>st</sup> dose		
Pneumococcal Conjugate (Pneu-C-13)	2 months	4 years	3 months to <12 months	0	4	8 weeks	8 weeks	8 weeks	Dose 4 should be given after 1 year.  Pneu-P-23 should be given at least 8 weeks after Pneu-C-13 for children $\geq 2$ years.
				1	3	8 weeks	8 weeks	8 weeks	
				2	2		8 weeks	8 weeks	
				3	1			8 weeks	
			12 months to <24 months	0	2	8 weeks			
				1 dose before 12 months	2		8 weeks		
				1 dose after 12 months	1	8 weeks			
			$\geq 2$ years through 4 years	2 or more doses before 12 months	1			8 weeks	
				0 or incomplete series	1				

- Return to the age-appropriate schedule when the child is up to date for age.
- A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses.
- For vaccine product information consult the Nunavut Immunization Manual.

This schedule is based on current recommendations from the Canadian Immunization Guide (CIG) and the National Advisory Committee on Immunization (NACI), found online at <http://phac-aspc.gc.ca/publicat/cig-gci/index-eng.php>



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For use when a child starts an immunization series at a later date, or falls behind the routine schedule by  $\geq 1$  month

**Consult RCDC for catch-up immunization scheduling.**

Vaccine	Minimum age for dose 1	Maximum age	Current age of Child	# of Prior Doses	# of Doses Due	Minimum Interval Between Doses			Additional Comments
						Dose 1 to dose 2	Dose 2 to dose 3	Dose 3 to dose 4	
DTaP-IPV-Hib	2 months	4 years	3 months through 4 years	0 or Unknown	4	4 weeks	4 weeks	6 months	Children should be $\geq 18$ months old when receiving dose #4
				1	3	4 weeks	4 weeks	6 months	
				2	2		4 weeks	6 months	
				3	1			6 months	
			4	0					
Rotavirus (RotaRix)	2 months	Dose 1: <15 weeks Dose 2: <8 months				4 weeks			Vaccination should not be initiated in infants aged 15 weeks or older
Rotavirus (RotaTeq)	2 months	Dose 1: <15 weeks Dose 3: <8 months				4 weeks	4 weeks		Vaccination should not be initiated in infants aged 15 weeks or older
Meningococcal C Conjugate	12 months	6 years	12 months through 6 years	0, unknown, or 1 or more doses given before 1 year.	1				

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For use when a child starts an immunization series at a later date, or falls behind the routine schedule by  $\geq 1$  month

**Consult RCDC for catch-up immunization scheduling.**

Vaccine	Minimum age for dose 1	Maximum age	Current age of Child	# of Prior Doses	# of Doses Due	Minimum Interval Between Doses	Additional Comments
						Dose 1 to dose 2	
Measles, mumps, rubella, varicella (MMRV)	12 months	12 years	13 months through 12 years	0	2	4 weeks	Children should be $\geq 18$ months old when receiving dose #2  MMRV is the preferred vaccine if both MMR and Varicella are indicated.  If child has had varicella disease refer to MMRV protocol
				1	1		
Measles, mumps, rubella (MMR)	12 months	18 years	13 months through 18 years	0 or unknown	2	4 weeks	Children should be $\geq 18$ months old when receiving dose #2  For use if parent chooses to give MMR and Varicella as separate components or MMRV contraindicated. MMRV is the preferred vaccine if both MMR and Varicella are indicated for those $< 13$ years.
				If 1 dose given before 1 year (e.g. travel)	2		
				1 dose given after 1 year	1		
Varicella	12 months	18 years	13 months through 18 years	0	2	4 weeks	Children should be $\geq 18$ months old when receiving dose #2  For use if parent chooses to give MMR and Varicella as separate components or if MMRV is contraindicated. MMRV is the preferred vaccine if both MMR and Varicella are indicated for those $< 13$ years.  2 <sup>nd</sup> dose of catch-up varicella vaccine should be offered in Grade 6, ideally with 2 <sup>nd</sup> dose of HPV vaccine.  If child has had varicella disease, refer to Varicella protocol.
				1	1		

- Return to the age-appropriate schedule when the child is up to date for age.
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For use when a child starts an immunization series at a later date, or falls behind the routine schedule by  $\geq 1$  month

**Consult RCDC for catch-up immunization scheduling.**

Vaccine	Minimum age for dose 1	Maximum age	Current age of Child	# of Prior Doses	# of Doses Due	Minimum Interval Between Doses				Additional Comments
						Dose 1 to dose 2	Dose 2 to dose 3	Dose 3 to dose 4	Dose 4 to dose 5	
Pneumococcal Polysaccharide (Pneu-P-23)	2 years	6 years	2 years through 6 years	0 or unknown	1					Pneu-P-23 should be given at least 8 weeks <i>after</i> Pneu-C vaccine
DTaP-IPV Or Tdap-IPV	4 years	6 years	4 through 6 years	Unknown	4	8 weeks	8 weeks	6 months		Dose #5 is only necessary if 4 <sup>th</sup> dose of vaccine containing DTaP-IPV was given before the 4 <sup>th</sup> birthday  Tdap-IPV and DTaP-IPV may be given interchangeably for children in this age group.  For children <5, give vaccine containing Hib (except for the 5 <sup>th</sup> dose)
				0	4	8 weeks	8 weeks	6 months		
				1	3	8 weeks	8 weeks	6 months		
				2	2		8 weeks	6 months		
				3	1			6 months		
				4	1				6 months	
Tdap-IPV	7 years	18 years	7 through 18 years	Unknown	3	8 weeks	6 months			If Tdap-IPV is unavailable, give Tdap vaccine and IPV vaccine separately using this schedule.  # of Prior Doses given includes any of the following vaccines: DTap-IPV-Hib DTap-IPV Tdap-IPV
				0	3	8 weeks	6 months			
				1 dose before 1 <sup>st</sup> birthday	3	8 weeks	6 months	6 months		
				1 dose after 1 <sup>st</sup> birthday	2	8 weeks	6 months			
				2	2		6 months	6 months		
				3	1			6 months		
				4 doses all given before 4 years	1				6 months	

- Return to the age-appropriate schedule when the child is up to date for age.
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For use when a child starts an immunization series at a later date, or falls behind the routine schedule by  $\geq 1$  month

**Consult RCDC for catch-up immunization scheduling.**

Vaccine	Minimum age for dose 1	Maximum age	Current age of Child	# of Prior Doses	# of Doses Due	Minimum Interval Between Doses		Additional Comments
						Dose 1 to dose 2	Dose 2 to dose 3	
HPV9 (Gardasil 9)	Girls & boys $\geq 9$ years (in grade 6)	Girls in grade 9 in Sept. 2017 through 2019	9 through 14 years	0 or unknown	2	6 months		Girls and boys who would have been in grade 6 in the 2017/2018 school year or later remain eligible until Grade 12.  # of Prior Doses includes HPV4 (Gardasil).
				1 dose	1	6 months		
		15 through 18 years	0 or unknown	3	2 months	12 weeks (at least 6 months after dose 1)		
			1 dose given before 15 years	1	6 months			
	2 doses less than 6 months apart	1		12 weeks (at least 6 months after dose 1)				
Tdap	Grade 6	18 years	Grade 6 through 18 years	0 doses	1 dose			Tdap is routinely given as a booster in grade 6.  Children requiring catch up including polio should receive Tdap-IPV depending on age.  See Tdap Immunization Protocol for pregnant clients.
Meningococcal-C-ACYW-135	Grade 9 ( $\geq 12$ years)	18 years	Grade 9 through 18 years					This vaccine is routinely given in grade 9.

- Return to the age-appropriate schedule when the child is up to date for age.
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## Nunavut Recommended Childhood Immunization Schedule

For more information on these immunizations, consult the immunization protocols in the Nunavut Immunization Manual

Vaccine Name	Age in Months									Age in Years		School Grade		
	0	1	2	4	6	9	12	15	18	2-3 Years	4-6 Years	Gr 6	Gr 9	Gr 12 <sup>5</sup>
Bacille Calmette-Guérin (BCG)	✓													
Hepatitis B (HB)	✓	✓				✓								
Diphtheria, Tetanus, acellular Pertussis, Polio, Haemophilus Influenza Type B (DTaP-IPV-Hib)			✓	✓	✓				✓					
Pneumococcal conjugate 13 (Pneu-C-13)			✓	✓	✓			✓						
Rotavirus (RV) <sup>1</sup>			✓	✓										
Measles, mumps, rubella, varicella (MMRV)							✓		✓					
Meningococcal C Conjugate (Men-C-C)							✓							
Pneumococcal Polysaccharide 23 (Pneu-P-23)										✓				
Diphtheria, Tetanus, acellular Pertussis, Polio (DTaP-IPV or Tdap-IPV)											✓			
Human Papillomavirus (HPV9) <sup>2</sup>												✓		
Tetanus, Diphtheria, acellular Pertussis (Tdap)												✓		
Varicella <sup>3</sup>												CU		
Meningococcal-C-ACYW													✓	
Influenza <sup>4</sup>														

1. Rotavirus vaccine dose series varies depending on which product is used. Review vaccine specific protocol for scheduling recommendations.
2. HPV9 is recommended for boys and girls. This is a 2 dose series (given at 0 and 6 months).
3. Catch-up for children who have only received 1 varicella containing vaccine (Varicella or MMRV), a 2<sup>nd</sup> dose of Varicella vaccine should be offered, ideally with 2<sup>nd</sup> dose of HPV vaccine.
4. Annual Influenza vaccine may be given after 6 months of age. Previously unvaccinated children <9 years of age require 2 doses of the vaccine, with an interval of 4 weeks. The 2<sup>nd</sup> dose is not needed if the child has received one or more doses of vaccine during a previous influenza season.
5. For all grade 12 students, ensure that the child has received all recommended vaccinations during childhood. Catch up vaccinations as necessary, according to the Nunavut Catch-up Schedule.

**For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the Nunavut Catch-up Schedule.**