

#### Changes in the Immunization Schedule Recommended by the Japan Pediatric Society August 1, 2018

- 1) We have included a Diphtheria, Polio, Tetanus (DPT) vaccine and an inactivated polio vaccine (IPV) into the schedule due to the reintroduction of a DPT vaccine in the market in January, 2018. Accordingly, we have added to recommend a booster vaccine for pertussis and polio before entering elementary school to maintain protection against pertussis and polio (voluntary vaccine). For details, please refer to the perspective of the Japan Pediatrics Society and precautions (Footnotes 7 and 9) in the schedule.
- 2) We have moved the location of DT vaccine next to DPT-IPV and DPT vaccines in the schedule and described that we could use DPT vaccine instead of DT vaccine as a booster vaccine (voluntary vaccine: Footnote 8).

## Vaccination Schedule Recommended by the Japan Pediatric Society

August 1, 2018

Japan Pediatric Society



							Infan	tile I	Period					Е	arly Ch	ildhoo	d							Sc	chool A	Age			ALL IN
Vac	ccine	Туре	Birth	6w	2m	3m	4m	5m	6m	7m	8m	9-11m	12-15m	16-17m	18-23m	2y	3у	4y	5у	6у	7y	8y	9у				≥10y		
Haemophilu type b	s influenzae	Inactivated		•	1	2	3				-	-	4 (F	potnote 1)															
Pneumococo (Footnote 2)	cal (PCV13)	Inactivated			1	2	3						4	(Footnote 2)															
Hepatitis B virus	Universal	Inactivated			1	2					3									(Foo	tnote 3	)							
(HBV)	For offspring of carrier mother	Inactivated	1	2					3																				
Rotavirus	Mono- valent	Live			1	2			(Fo	otnote	e 4)																		
Rotavirus	Penta- valent	Live			1	2	3				(Footnote 5)																		
Diphtheria, I Tetanus, Pol (DPT-IPV)		Inactivated				1	2			(3			4	(Footnote 6	5)				(up to	7.5yrs	)								
Diphtheria,		Inactivated		1 2						3				④ (Footnote 6)			(up to 7.5yrs				)								
Tetanus (D	mactivated				1)				<u> </u>	) 		4	(Footnote 7) (Footnote 8)																
Diphtheria,	Tetanus (DT)	Inactivated																					① 11yrs	12 yrs					
Inactivated p	polio virus	Inactivated	1 2					3				(a	(Footnote 6	-)				<u> </u>	7.5yrs	)									
(IPV)		mactivated				Ū				<u> </u>	- <del></del>		4	/ (Footnote t	5)				(Footno	ote 9)									
BCG		Live							1					1															
Measles, Ru	bella (MR)	Live												(Footnote 10)															
Varicella		Live											1		2								(Foot	note 11	1)				
Mumps		Live											1						(Footnote										
Japanese En	cephalitis	Inactivated														① ③ (up to 7.5 yrs) ④ 9-12yrs													
Influenza		Inactivated												Annu	ally (Oc	ctober, N	ovemb	er, etc.)	1)2	2)								① ≥1	3yrs
Human Papi (HPV)	illoma Virus	Inactivated																					(Foot	tnote 13)	Gr.	6 Hig	nior h Gr.1 ②③ otnote 14)	Junior Grade 2 School 0	- High
r	Recommended a range for routine vaccination	age		Recom range t	for vol	_			Period vaccin	-	ble for	routine		Period pos		voluntary		b	ut reco	ed in pommen Pediatri	ded by		t			riod for alth insi		ional coverage	9

# Vaccination Schedule Recommended by the Japan Pediatric Society Standard Period, Perspective of the Japan Pediatric Society, Precautions

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	By Health Insurance	Voluntary Vaccination	1

	Routine
	Vaccination

Vaccine	Туре	Standard Age of Vaccination and Vaccination Period	Perspective of the Japan Pediatrics Society	Precautions
Haemophilus influenzae type b	Inactivated	27-56 days (4-8 wks) interval between ①- ②-③ 7-13 mos interval between ③-④	(Footnote 1) ④: can obtain satisfactory immunity if administered from 12 mos of age	As a routine immunization, $\geq$ 27 days interval between ①-②-③, $\geq$ 7 mos interval between ③-④  If first dose administered between 7 mos and 11 mos: After ①-② an interval of $\geq$ 7 mos then ③  If the first dose administered between 1 yr and 4 yrs: only ①  Vaccination possible for children $\geq$ 5 yrs if they have risk factors.
Pneumococal, Conjugate (PCV13)	Inactivated	≥27 days (4 wks) interval between ①-②- ③ ≥60 days (2 mos) interval between ③-④ and administered when the child is 1 yr - 1 yr 3 mos	(Footnote 2) A supplemental dose of PCV13 is recommended for children <6 yrs who completed appropriate numbers of PCV7 by the Immunization Law, apart from 8 wks from the last PCV7 (voluntary vaccination).	If first dose administered between 7 mos-11 mos: After ①, ② vaccination, an interval of ≥60 days and after 1 yr of age, followed by catch-up vaccination ③ If first dose administered between 1 yr-23 mos: ①, ② with ≥60 days interval If first dose administered between 2 yrs-4 yrs: only ① (Footnote 2) Administer PCV13 if they did not complete appropriate numbers of PCV7.
Hepatitis B Virus (HBV) Universal Vaccine		①2 mos ②3 mos ③7-8 mos ①-② Interval of ≥27 days (4 wks) ①-③ Interval of ≥139 days (20 wks)	In case of existence of family members with HBV careers other than mother, early immunization is warranted, not waiting till 2 mos of age.	(Footnote 3) Immunization schedule for children who do not receive vaccines during infancy is depending upon the one with universal vaccination.
Hepatitis B Virus (HBV) Vaccines for Prevention of Mother to Child Transmission	Inactivated	① At birth ② 1 mo ③ 6 mos		If mother is positive for HBs antigen, the child will receive vaccine and HB immunoglobulin simultaneously at birth.  Vaccine fee is covered by the national health insurance.  See in details at JPS Homepage "New strategies for the prevention of mother to child transmission of HBV." Refer <a href="http://www.jpeds.or.jp/modules/activity/index.php?content_id=141">http://www.jpeds.or.jp/modules/activity/index.php?content_id=141</a> (in Japanese)
Rotavirus	Live	Vaccination possible from 6 wks after birth. ①: recommended between 8 wks and under 15 wks RV1 vaccine (Rotarix®): For ①-② a total of 2 doses with an interval of ≥4 wks. For RV5 vaccine (RotaTeq®): ①-②-③: a total of 3 doses with ≥4 wks between doses		(footnote 4) Total 2 doses, ② to be completed within 24 <sup>th</sup> wk of age (footnote 5) Total 3 doses, ③ to be completed within 32 <sup>nd</sup> wk of age
Diphtheria, Pertussis, Tetanus, Polio (DPT-IPV, IPV)	Inactivated	Interval of 20-56 days between ①-②-③ (Footnote 6) ≥6 mos between ③ – ④ Generally, during 12-18 mos after ③		Interval of ≥20 days between ①-②-③ as a routine vaccination Please refer to vaccination schedule at <a href="http://www.mhlw.go.jp/bunya/kenkou/polio/dl/leaflet_120601.pdf">http://www.mhlw.go.jp/bunya/kenkou/polio/dl/leaflet_120601.pdf</a> (in Japanese) for persons who did not complete vaccination but was administered OPV vaccine and/or IPV prior to August 31, 2012.
Diphtheria, Pertussis, Tetanus (DPT)		Interval of 20-56 days between ①-②-③ (Footnote 6) ≥6 mos between ③-④ Generally, during 12-18 mos after ③		
Diphtheria, Pertussis, Tetanus (DPT) (For the prevention pertussis after entering elementary school)	Inactivated	(5) ≥5 yrs, <7 yrs, ≥6 mo between (4)-(5) (6) 11-12 yrs	(Footnote 7) We recommend a booster vaccine before entering elementary school because low levels of antibody against pertussis in children before entering elementary school have been reported.  (Footnote 8) It is possible to use DPT vaccine instead of DT vaccine to prevent pertussis.	Status of pertussis antibody in children in 2013 demonstrated that a rate of anti-PT antibody ≥10EU/mL was down to 40% in children 4-7 years (IASR 2017; 38: 31-33)  Use 0.5mL. (0.1mL for DT vaccine)

Vaccine	Туре	Standard Age of Vaccination and Vaccination Period	Perspective of the Japan Pediatrics Society	Precautions
Diphtheria, Tetanus (DT)	Inactivated	①: At 11 yrs until reaching 12 yrs		According to the Immunization Law, ≥11 yrs, <13 yrs
Inactivated polio vaccine (IPV)		Interval of 20-56 days between ①-②-③ (footnote 7) ≥6 mos between ③-④ Generally, during 12-18 mos after ③		Please refer to vaccination schedule at <a href="http://www.mhlw.go.jp/bunya/kenkou/polio/dl/leaflet_120601.pdf">http://www.mhlw.go.jp/bunya/kenkou/polio/dl/leaflet_120601.pdf</a> (in Japanese) for persons who did not complete vaccination but was administered OPV vaccine and/or IPV prior to August 31, 2012.
Inactivated polio vaccine (IPV) (For the prevention polio after entering elementary school)	Inactivated	⑤ ≥5 yrs, <7 yrs	(Footnote 9) We recommend inactivated polio vaccine before lowering antibodies against polio when children enter elementary school.	
BCG	Live	Administered under 12 mos of age, generally administered during the period from 5 mos to <8 mos	Early vaccination required in areas where incidence of tuberculosis is high	
Measles, Rubella (MR)	Live	①: 1 yr - <2 yrs ②: ≥5 yrs - <7 yrs (footnote 10) 1 year before entering elementary school		Vaccination possible ≥6mos for post-exposure prophylaxis; however, the vaccine is not counted, regular ① and ② need to be vaccinated.
Varicella	Live	①: 12-15 mos ②: 6-12 mos after ①	(Footnote 11) It is necessary to provide 2 doses of varicella vaccine for children who are not suffered from varicella and unvaccinated.	①-②:Leave an interval of ≥3 months as a routine vaccination ①-②: Leave an interval of ≥4 weeks if ≥13 yrs
Mumps	Live	① :≥1 yr	(Footnote 12) To ensure vaccine efficacy, 2 doses are necessary.  ①: early vaccination at 1 yr of age ②: simultaneous administration with 2 <sup>nd</sup> dose of MR (≥5 yrs - <7 yrs, 1 year before entering elementary school is recommended.)	
Japanese Encephalitis	Inactivated	①, ②: 3 yrs, leave a 6-28 days interval between ①-② ③: 4 yrs ④: 9 yrs (grade 3-4 elementary school)	We recommend vaccination for Japanese encephalitis (JE) vaccine from 6 months of age in children who will travel or stay in the endemic area of JE, or live in the area where high seroprevalence of JE virus in pigs is confirmed (Japan Pediatric Society Homepage, "Recommendation for JE vaccine from 6 months of age in children with high risks for JE. Refer to <a href="http://www.jpeds.or.jp/modules/activity/index.php?content_id=207">http://www.jpeds.or.jp/modules/activity/index.php?content_id=207</a> (in Japanese))	A dose per vaccination: 6mo- <3 yrs: 0.25mL; ≥3 yrs: 0.5mL  For general routine vaccinations, first set administered from 6 mos to under 90 mos (7.5 yrs), and second set at age 9 to under 13 yrs.  Interval of ≥6 days between ①-②, ≥6 mos between ② and ③.  For children who were born from April 2, 2007 to October 1, 2009, it is possible to receive vaccine as a routine vaccine if they did not receive 1st stage (①, ②, ③) during 6 mo-<90 mos (7 yr 6mos) or 9 yrs to <13 yrs.  Due to the assertive recommendation to refrain from administration in May 2005, a detailed schedule for those who were born between April 2, 1995 and October 1, 2009, refer to the Ministry of Health, Labor, and Welfare Homepage <a href="http://www.mhlw.go.jp/bunya/kenkou/kekkaku-kansenshou20/annai.html">http://www.mhlw.go.jp/bunya/kenkou/kekkaku-kansenshou20/annai.html</a> (in Japanese)
Influenza	Inactivated	Leave an interval of 4 wks between ① and ② (2-4 wks)		<13 yrs: 2 doses, ≥13 yrs: 1 or 2 doses Single dose: 6 mos - <3 yrs: 0.25 mL; ≥3 yrs: 0.5 mL

Vaccine	Туре	Standard Age of Vaccination and Vaccination Period	Perspective of the Japan Pediatrics Society	Precautions
Human Papilloma Virus (HPV)	Inactivated	between ①-②, leave 6 mos between ①-③ 3 HPV4 vaccine (Gardasil®): 2 mos interval	Although active recommendation for HPV vaccine has been suspended since June, 2013, we recommend active immunization because we have strategies for the understanding and analyses of adverse events of HPV vaccine, establishment of reporting system and management/counseling for symptoms after vaccination, and rescue for recipients who received health issues (Refer to the Homepage by the Professional Promotion Counsil of Immunization http://vaccine-kyogikai.umin.jp/pdf/20160418 HPV-vaccine-opinion.pdf (in Japanese))	

### Immunization Check List

			Nar	<u>me :</u>						<u>D</u>	ate of	f Birth	): <u> </u>	/	/		_		
Vaccines	Туре		Dos	e 1			Dos	e 2			Dose	e 3			Dos	e 4		Dose 5	Dose 6
Haemophilus influenzae type b (Hib)	inactivated	<u> </u>	/	/	)	<u> </u>	/	/	)	_ (	/	/	)	<u> </u>	/	/	)		
Pneumococcal conjugate (PCV13)	inactivated	_ (	/	/	)	_ (	/	/	)	<b>-</b> (	/	/	)	<b>-</b> (	/	/	)	□ ( / / ) Refer to Footnote 2	
Hepatitis B (HBV)	inactivated	<u> </u>	/	/	)	<u> </u>	/	/	)	<u> </u>	/	/	)						
Rotavirus	live attenuated	<b>-</b> (	/	/	)	□ ( Dose 2	/ final for	/ RV1 (R	) otarix)	□ ( Dose 3	/ final for R	/ RV5 (Rota	) aTeq)						
Diphtheria, Pertussis, Tetanus, Poliovirus (DPT-IPV)	inactivated	_ (	/	/	)	_ (	/	/	)	_ (	/	/	)	<b>-</b> (	/	/	)		
Diphtheria, Pertussis, Tetanus (DPT) (for pertussis)	inactivated																	_ ( / / )	_ ( / / )
Diphtheria, Tetanus (DT)	inactivated																	- ( / / )	
Polio (for polio)	inactivated																		
BCG	live attenuated	<b>-</b> (	/	/	)														
Measles, Rubella (MR)	live attenuated	<b>-</b> (	/	/	)	<u> </u>	/	/	)										
Varicella	live attenuated	<u> </u>	/	/	)	_ (	/	/	)										
Mumps	live attenuated	<b>-</b> (	/	/	)	<b>-</b> (	/	1	)										
Japanese encephalitis	inactivated	_ (	/	/	)	<b>-</b> (	/	/	)	□ (	/	/	)	<b>-</b> (	/	/	)		
Influenza	inactivated	(Ann	ual va	accinat	tion re	comme	nded,	refer t	to the	2nd she	et)								
Human papillomavirus (HPV)	inactivated	_ (	/	/	)	_ (	1	/	)	<b>-</b> (	1	/	)						





August 1, 2018, Japan Pediatric Society



## Influenza Vaccination Checklist

Name:	Date of Birth:	/	/	

Age		Do	se 1			Do	ose 2		Age			ose 1			Do	ose 2	
6-11 mos	_ (	/	/	)	<b>-</b> (	/	/	)	8 yrs	<b>-</b> (	/	/	)	_ (	/	/	)
1 yr	_ (	/	/	)	_ (	/	/	)	9 yrs	_ (	/	/	)	_ (	/	/	)
2 yrs	_ (	/	/	)	<b>-</b> (	/	/	)	10 yrs	<b>-</b> (	/	/	)	_ (	/	/	)
3 yrs	_ (	/	/	)	_ (	/	/	)	11 yrs	_ (	/	/	)	_ (	/	/	)
4 yrs	_ (	/	/	)	_ (	/	/	)	12 yrs	_ (	/	/	)	_ (	/	/	)
5 yrs	_ (	/	/	)	_ (	/	/	)	13 yrs	<b>-</b> (	/	/	)				
6 yrs	_ (	/	/	)	_ (	/	/	)	14 yrs	_ (	/	/	)				
7 yrs	_ (	/	/	)	<b>-</b> (	1	/	)	15 yrs	_ (	1	/	)				

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