



Recommended Childhood and Adolescent Immunization Schedule—United States, 2016

COMMITTEE ON INFECTIOUS DISEASES

The 2016 recommended childhood and adolescent immunization schedule has been approved by the American Academy of Pediatrics, the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention, the American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists. The 2016 format is similar to the 2015 schedule, with a single schedule for people from birth through 18 years of age. The yellow bars indicate the recommended age range for all children and contain a notation indicating the recommended dose number by age. The green bars indicate the ages for recommended catch-up. The purple bars designate the recommended ages for immunization for certain groups at high risk. A blue bar has been added for the first time and indicates the range of recommended ages for people in non-high-risk groups who may receive a vaccine, subject to individual decision-making. The combined green and purple bar indicates the recommended age when vaccine catch-up is encouraged for certain high-risk groups. The white boxes show the ages when a vaccine is not recommended routinely. The catch-up schedule offers recommendations for children and adolescents 4 months through 18 years of age who start vaccinations late or are >1 month behind.

The immunization schedule will not be published in *Pediatrics*. Readers are referred to the American Academy of Pediatrics Web site (http://redbook.solutions.aap.org/SS/Immunization_Schedules.aspx) or the Centers for Disease Control and Prevention Web site (<http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>) for the most recent version of the immunization schedule, the full set of footnotes, and the catch-up schedule. This method will ensure that providers have the most current recommendations. In addition, the Web sites include tables (job aids) to assist in clarification of recommended use of *Haemophilus influenzae* type b vaccine, pneumococcal- and pertussis-containing vaccines as a function of age, the number of doses previously administered, and the time interval since the last dose.

Footnotes contain recommendations for routine vaccination, for catch-up vaccination, and for vaccination of children and adolescents with

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high-risk conditions or in special circumstances. A parent-friendly vaccine schedule for children and adolescents is available at <http://www.cdc.gov/vaccines/schedules/index.html>. An adult immunization schedule is available at www.cdc.gov/vaccines.

These schedules are revised annually to reflect current recommendations for use of vaccines licensed by the US Food and Drug Administration and include the following specific changes from last year:

- The sequence of listing of vaccines in the Recommended Immunization Schedule for Persons Aged 0 Through 18 Years has been modified so that routinely recommended vaccines are grouped from the earliest age to older ages of administration. The order of the footnotes has been modified to reflect the new order.
- The split purple-green bar key has been removed from the legend because both colors are defined separately.
- A purple bar representing the range of recommended ages from 5 through 18 years for certain high-risk groups has been added to *H influenzae* type b.
- The tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis, adsorbed, row has been moved to a lower position in the schedule to facilitate vaccine grouping by age.
- The human papillomavirus (HPV) nomenclature has been modified to reflect the new designation (eg, HPV9 is now referred to as 9vHPV).
- The HPV row contains an additional purple bar from age 9 to 10 years to signify that children with a history of sexual abuse are at increased risk of HPV and should be vaccinated.

- Meningococcal B vaccine has been added to the schedule, with a purple bar indicating vaccination at 10 years of age for people at increased risk. A blue bar has been added for people aged 16 through 18 years to indicate that non-high-risk people may be considered for vaccination.
- The pneumococcal polysaccharide bar has been moved to the bottom of the schedule because this vaccine is not routinely indicated for any population.
- Minor, simplifying word changes have been made to the footnotes to address inadvertent administration of a dose of diphtheria-tetanus-acellular pertussis, guidance for inactivated poliovirus vaccine use in children who previously received only the oral polio vaccine before the fourth birthday, clarification of the time interval between doses of HPV vaccine, and a discussion regarding use of meningococcal B vaccines.

Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System. Guidance about how to obtain and complete a form for this system can be obtained at www.vaers.hhs.gov or by calling 800-822-7967. Additional information can be found in the *Red Book* and at *Red Book Online* (<http://aapredbook.aappublications.org/>). Statements from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention that contain details of recommendations for individual vaccines, including recommendations for children with high-risk conditions, are available at www.cdc.gov/vaccines/pubs/ACIP-list.htm. Information on new vaccine releases, vaccine supplies, and interim recommendations resulting from vaccine shortages and

statements on specific vaccines can be found at www.aapredbook.org/news/vaccstatus.shtml and www.cdc.gov/vaccines/pubs/ACIP-list.htm.

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