

National Immunisation Program Queensland Schedule

Commencing 1 March 2008

AGE	VACCINES				Special funded vaccines (enquire with your immunisation service provider)	
	Infanrix Hexa™ must be reconstituted prior to administration – shake the suspension in the prefilled syringe, add entire contents with the Hib pellet, shake until the pellet is completely dissolved. The 0.5 mL reconstituted vaccine is a slightly more cloudy suspension.				Additional vaccine for High Risk Children	Additional vaccines for Aboriginal & Torres Strait Islander children
Birth	Hepatitis B birth dose administered within 7 days of birth				As for routine childhood immunisation PLUS the vaccines below	As for routine childhood immunisation PLUS the vaccines below
2 months	Infanrix Hexa™	Prevenar™	RotaTeq™			
4 months	Infanrix Hexa™	Prevenar™	RotaTeq™			
6 months	Infanrix Hexa™	Prevenar™	RotaTeq™			
12 months	*Comvax™ / Hiberix™		Priorix™	Meningitec™	Prevenar™	
18 months				Varilrix™		Vaqa™
24 months						Pneumovax 23™ Vaqa™
4 years	Infanrix-IPV™			Priorix™	Pneumovax 23™	

* Comvax™ will be replaced by a booster dose of monovalent Hib (Hiberix™) in 6 months time (approximately September 2008) because by then all those children who completed their primary vaccinations by 1st March 2008 will have received their booster dose of Comvax™

Regardless of previous vaccinations, children in Queensland should receive the vaccines listed above.

1 March 2008



Tip Sheet

For children who have received previous vaccinations before 1 March 2008

Comvax™ should only be used for children presenting at 12 months who have not received any doses of Infanrix Hexa™

**NIP Queensland Schedule
Commencing 1 March 2008**

Doses received before 1 st March 2008	Vaccines received before 1 st March 2008	On Presentation	Vaccines required on or after 1 st March	Future Immunisations	Age	Vaccine
Children who have received 1 dose (1 st dose)	Comvax™ Infanrix/IPV™ Prevenar™ RotaTeq™	When presenting for 2 nd dose (4 month vaccination) →	Infanrix Hexa™ Prevenar™ RotaTeq™	Subsequent doses should follow the 1 March 2008 schedule	2 months	Infanrix Hexa™ Prevenar™ RotaTeq™
Children who have received 2 doses (1 st and 2 nd dose)	Comvax™ Infanrix/IPV™ Prevenar™ RotaTeq™	When presenting for 3 rd dose (6 month vaccination) →	Infanrix Hexa™ Prevenar™ RotaTeq™	Subsequent doses should follow the 1 March 2008 schedule	4 months 6 months	Infanrix Hexa™ Prevenar™ RotaTeq™ Infanrix Hexa™ Prevenar™ RotaTeq™
Children who have received 3 doses (1 st , 2 nd and 3 rd dose)	Comvax™ Infanrix/IPV™ Prevenar™ RotaTeq™	When presenting for 12 month vaccination →	*Comvax™ Priorix™ Meningitec™	Subsequent doses should follow the 1 March 2008 schedule	12 months 18 months 4 years	Meningitec™ *Comvax™ / Hiberix™ Varilrix™ Infanrix-IPV™ Priorix™

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