VACCINE SCHEDULES

The vaccine schedules detailed below are those recommended by the vaccine manufacturers. Many vaccines can be given at short notice or schedules shortened to accommodate your travel plans. Vaccines are listed A-Z and not in any order of importance or priority. Please see www.medicines.org.uk for detailed information.

Vaccination	Vaccine Type	Contraindications	Schedule	Other information
BCG (including Mantoux testing)	BCG is normally into the left upper arm	Those who have already had a BCG vaccine. Those with a past history of TB. Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents. Those whose immune systems are compromised. Young babies in a household where an active case of TB is suspected or confirmed	Mantoux testing is used as a screening test for tuberculosis infection or disease and is indicated in all individuals >6 years prior to receiving BCG vaccine. Mantoux testing is not a vaccine. It can be performed for those requiring Mantoux testing for occupational purposes and is sometimes indicated for those aged <16 years travelling to countries with a high incidence of tuberculosis infection. The Mantoux test result is read 48 - 72hours later for which you will require a second appointment in clinic.	If a live vaccine has recently been given and a Mantoux test is required, then a four week interval is advised. If you require a Mantoux test or BCG please go to the home page of the website and click on the request an appointment form then follow the instructions
Cholera (Dukoral)	Vaccine is given orally	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	Aged 6 and over: First dose on day 0. Second dose between one and six weeks after first dose For children aged 2- 6 years: First dose on day 0. Second dose between 1- 6 weeks after first dose. Third dose between 1- 6 weeks after second dose Booster: For continuous protection against cholera, a single booster dose is recommended two years after completing the primary course for adults and children over six years of age. For children aged 2- 6 years a booster after six months is required. If more than 2 years have elapsed the primary course should be repeated.	Those receiving vaccine should not eat or drink one hour pre and post administration of this vaccine.
Diphtheria/Polio/ Tetanus (DPT) (Revaxis)	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	For adults: Initial course 3 injections at 4 week intervals and a 4th dose at 5 years. Booster: Single booster doses at 10 years.	Those who have completed five doses of vaccine in their lifetime should continue to have vaccine every 10 years if at continued risk and travelling.

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Influenza	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents including eggs.	Adults & children aged > 2 years annual dose Children aged 2-9 years who have not received influenza vaccine before should receive a 2nd dose 4 weeks later.	If you require a Flu vaccine for your child please go to the home page of the website and click on the request an appointment form then follow the instructions
Hepatitis A (Havrix Monodose, Vaqta adult or Avaxim)	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	Adults: Course of 2 injections ideally 6 to 12 months apart. Timing: Ideally 2 weeks before travel although may be worth giving for those travelling at short notice e.g. within days of travel. Booster: One injection gives protection for 12 months and a 2nd injection gives at least 25 years protection in a healthy individual.	
Hepatitis A Junior (Havrix Junior Monodose or Vaqta Paediatric)	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	Children: Aged 1 to15-17 years of age (depending on the vaccine used), 2 injections as per adult schedule. Timing: Ideally 2 weeks before travel, although may be worth giving for those travelling at short notice e.g. within days of travel. Booster: One injection gives protection for 12 months and a 2nd injection gives at least 25 years protection in a healthy individual.	Hepatitis A vaccine is not usually required in those under 1 year of age.
Hepatitis B (Engerix B, Engerix B Paediatric, HB Vaxpro, HB Vaxpro paediatric)	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	Adults and Children: Course of 3 injections given at 0, 1 and 6 months or 0, 1 and 2 months. A rapid schedule (for adults over 18 yrs only) who are travelling at short notice can be given at 0, 7 and 21-28 days with a further booster after 1 year. The WHO has concluded that, although knowledge about the duration of protection against infection and disease is still incomplete, protection against chronic infection persists for 20-30 years or more. WHO conclude that there is no compelling evidence for recommending a booster dose of hepatitis B vaccine in routine immunisation programmes. Based on this conclusion, the current UK recommendation is that those who have received a primary course of immunisation do not require a reinforcing dose of Hep B-containing vaccine, except in the following categories: • healthcare workers (including students and trainees), who should be offered a single booster dose of vaccine, once only, around five years after primary immunisation • patients with renal failure • at the time of a significant exposure	Hepatitis B vaccine can be given to those requiring it for occupational health purposes, as well as for travel.

Vaccination	Vaccine type	Contraindications	Schedule	Other information
Hepatitis A and B Combined (Twinrix)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Adults: Protection against Hepatitis A and Hepatitis B. Course of 3 injections given at 0, 1 and 6 months. A rapid schedule on days 0, 7 and 21 is available for adults travelling at short notice and requires a further booster after 1 year. Children: (1-15 years of age): Course of 3 injections given at 0, 1 and 6 months.	
Hepatitis A and Typhoid Combined (Viatim or Hepatyrix)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Adults or children aged >15 or 16 years dependant on vaccine brand: One dose protects for 1 year for Hepatitis A and 3 years for Typhoid. Timing: Ideally at least 10 days before travelling to high risk areas, although may be worth giving for those travelling at short notice e.g. within days of travel. Booster: A single dose of Hepatitis A given 6-12 months later gives protection for 25 years in healthy individuals.	
Japanese Encephalitis (Ixiaro)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Schedule: 2 doses day 0 and day 28. When time is limited a 0 and day 7 schedule can be considered for adults aged 18-65 years. With both schedules, primary immunisation should ideally be completed at least one week prior to potential exposure to Japanese encephalitis virus. Booster: Following a primary course a booster dose should be considered after 12-24 months if at risk.	For adults and children from 2 months of age
Measles, Mumps and Rubella (MMR Vaxpro or Priorix)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Adults: One or two injections one month apart. Children: Two doses. UK immunization programme usually given over the age of one and pre-school. Booster: Two doses as per schedule, no further boosters required.	May be given to those under the age of one. Seek specialist advice in the clinic. MMR and Yellow Fever should ideally not be given on the same day. A 4-week gap between vaccines is advisable. MMR should be delayed until a Mantoux test has been read unless protection against measles is required urgently. If MMR has recently been given and a Mantoux test is required, then a four-week interval is advised.

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Meningitis ACWY vaccine (Menveo)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents	Children from birth to less than 1 year: two doses, 1 month apart. Adults and children 1 year and over: one dose only Booster: 5 years.	
Rabies (HDCV, Rabipur)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents including eggs for Rabipur.	Adults and children**:** Course of 3 injections days 0, 7 and 21 or 28. Timing: Ideally one month before travelling to complete schedule. There is no minimum age for rabies vaccination if clinically indicated for pre or post exposure vaccination.	Rabies post exposure risk assessment and treatment will still be required.
Tick-borne encephalitis vaccine (Ticovac, Ticovac Junior)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents including eggs.	Adults and children**:** Course of 3 injections, day 0, 1-3 months and 5-12 months after the second dose. For rapid short-term protection of children and adults the second dose may be given two weeks after the first dose and gives at least 90% protection by day 14 after the second dose. Timing**:** Minimum time, ideally 2 weeks before travelling to high risk areas. Junior vaccine is for children aged 1-15 years of age	
Typhoid vaccine (Vivotif, Typhim Vi)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Adults and children**:** Vivotif is an oral vaccine against typhoid fever for children aged six years and adults. Timing**:** Each capsule should be taken approximately one hour before a meal with a cold or lukewarm drink (temperature not to exceed body temperature, e.g. 37°C) on alternate days 1, 3 and 5. Adults and children aged 2 years or over: Typhim is a single dose injection. Timing: Ideally at least 10 days before travelling. Booster: for Vivotif & Typhim Vi is recommended after 3 years.	Vivotif is a live oral vaccine.
Varicella (Varivax)	Injection into the upper arm or outer thigh.	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents.	Children from one year of age or older and adults should receive two doses of varicella vaccine, four to eight weeks apart. No booster required.	If you require a Varicella vaccine for your child please go to the home page of the website and click on the request an appointment form then follow the instructions

Vaccination	Vaccine type	Contraindications	Schedule	Other information
Yellow fever (YF) vaccine (Stamaril)	Injection into the upper arm or outer thigh	Severe allergic reaction (anaphylaxis) to previous dose of the vaccine or its constituents including eggs.	Adults and children: Travellers aged 9 months and over visiting areas where yellow fever is recommended. Timing: Ideally at least 10 days before entering an endemic area.	Yellow Fever risk assessment must be completed prior to vaccination. Yellow Fever certificates will be issued on the same day vaccine is received.