**What are the new high risk eligibility criteria for the meningococcal conjugate ACYW-135 vaccine?**

In addition to the current high risk criteria, the Men-C-ACYW vaccine is now publicly funded for persons with HIV and those living in a high risk setting. Further details can be found in the linked link.

**What is the schedule for the HPV-4 (Gardasil®) vaccine?**

- **For unimmunized high-risk children two to nine years of age who were born in September 2003 or later, they remain eligible until they receive one dose of Gardasil®.**
- **For unimmunized children two to nine years of age who were born in August 2002 or later, they remain eligible until they receive one dose of Gardasil®.**
- **For unimmunized children two to nine years of age who were born in August 2001 or later, they remain eligible until they receive one dose of Gardasil®.**

**What if a Grade 8 female started her HPV-4 vaccination series between September 2011 and September 2012?**

- If a Grade 8 female started her HPV-4 vaccination series between September 2011 and September 2012, she will need to receive two more doses of Gardasil® to complete her series. The second dose is given at least two months after the first dose. The third dose is given six months after the second dose.

**What new high risk eligibility criteria for the meningococcal conjugate ACYW-135 vaccine?**

- In addition to the current high risk criteria, the Men-C-ACYW vaccine is now publicly funded for persons with HIV and those living in a high risk setting.

**Who should get a polio vaccination? When should they get it?**

- **Youth and adults who have not completed their primary series.**
- **Youth and adults who have received one or more doses of inactivated poliovirus vaccine (IPV) more than 10 years ago.**
- **Youth and adults who have received three or more doses of oral poliovirus vaccine (OPV) as part of the public funded program.**

**Do you need to keep giving the polio vaccine to children under nine if they get the meningococcal conjugate ACYW-135 vaccine?**

- Yes, you should continue to give all the doses of polio vaccine that are recommended for children under nine years of age. Giving meningococcal conjugate ACYW-135 vaccine to children who have already received up to three doses of IPV does not affect the immune response to IPV.

**Why is there a change in the recommendations for the hepatitis B (HBV) vaccine?**

- In some provinces, the hepatitis B (HBV) vaccine is now administered at birth and four months of age instead of birth and six months of age.

**What is the dosing schedule for IPV (Gardasil®)?**

- The dosing schedule for the IPV vaccine is the same as the school-based program at two years, two months after the first dose, and six months after the first dose.

**What are the new high risk eligibility criteria for the meningococcal conjugate ACYW-135 vaccine?**

- In addition to the current high risk criteria, the Men-C-ACYW vaccine is now publicly funded for persons with HIV and those living in a high risk setting.

**What is the schedule for the hepatitis B (HBV) vaccine?**

- The hepatitis B (HBV) vaccine is administered at birth and four months of age instead of birth and six months of age.

**What is the current high risk criteria for the meningococcal conjugate ACYW-135 vaccine?**

- The current high risk criteria for the meningococcal conjugate ACYW-135 vaccine are:
  - Individuals with a diagnosis of HIV/AIDS
  - Individuals who have a past history of receiving parenteral drug abuse

**What is the dosing schedule for IPV (Gardasil®)?**

- The dosing schedule for the IPV vaccine is as follows:
  - For children who have received one dose of IPV at one year of age, they remain eligible until they receive a second dose at least two months after the first dose.
  - For children who have received two doses of IPV at one year of age, they remain eligible until they receive a third dose at least two months after the second dose.

**What is the schedule for the hepatitis B (HBV) vaccine?**

- The hepatitis B (HBV) vaccine is administered at birth and four months of age instead of birth and six months of age.
What are the recommended schedule and eligibility criteria for Routine childhood immunization programs?


Two-dose varicella vaccine series

Varivax® and Varivax® 10

Why is the first dose of varicella vaccine scheduled to be given at 12 months of age?

Why should you give the second varicella vaccine if the child has already had chickenpox?

Are children considered immune to chickenpox if they had chickenpox before 2 years of age?

Why is a lifetime dose of Tdap recommended for all adolescents?

When should adolescents receive Tdap vaccine?

Note: for more detailed information, please consult the Canadian Immunization Guide, 2006, 7th edition (or as current), Public Health Agency of Canada, and the manufacturer’s product monograph.

Revisions

Preconception conjugate vaccine (Prenexim® 13)

What is Prenexim® 13 conjugate pneumococcal vaccine?

Why is Ontario changing preconception conjugate (Prenexim® 13) conjugate pneumococcal vaccine to a three-dose schedule for low-risk children?

There is evidence supporting a three-dose schedule for healthy children, and the National Advisory Committee on Immunization (NACI) in Canada and the Preventer® 3 provide a three-dose schedule.1 Other provinces, including Quebec, New Brunswick, and British Columbia, have introduced a three-dose schedule.

Are children born has five years of age who attend group child care centres and/or are of Aboriginal origin considered to be at high risk for pneumococcal disease?

No, it is recommend that these children receive the three-dose schedule unless they have medical conditions that put them at high risk. However, Ontario recommends an extra dose of Pneu-C-13 for those who have completed a primary series of Pneu-C-13 and who attend child care centres or are Aboriginal.

What are the changes to the high risk eligibility criteria for Pneu-C-13 conjugate pneumococcal vaccine?

The high risk eligibility criteria for Pneu-C-13 have been updated to include medical conditions that are consistent with the most recent NACI statement. Children who are five years of age or less and who are Aboriginal and children who do not have a high risk medical condition have been removed from the high risk criteria, as all children born five years or have an opportunity for receiving a "catch-up" dose. Three-dose Schedule of the Publicly Funded Immunization Schedule for Ontario—August 2012.

What are the recommended schedule and eligibility criteria for Rotarix™ and Priorix-Tetra™?

Rotarix™ vaccine (Varilrix®)

Rotaviruses (Rotavirus)

What are the recommended schedule and eligibility criteria for Rotarix™ and Priorix-Tetra™ vaccines?

Why is the second dose of varicella vaccine scheduled to be given at 22 months of age?

Measles, mumps, rubella and rubella vaccine (Varilrix®) Schedule

What is the route of administration for Rotarix™ and Priorix-Tetra™ vaccines?

For Rotarix™ and Priorix-Tetra™ the oral administration was in a separate package. Please refer to the product monograph, Varilrix® (Abstergo) or the product monograph for detailed information regarding oral administration.

Can I receive a second dose of varicella vaccine and a second dose of MMRV vaccine at the same time?

Two-dose varicella vaccine series (Varivax® and Varivax® 10)

What are the expanded criteria for receiving a second dose of varicella, mumps, rubella and rubella (MR) vaccine?

When should the second dose of varicella vaccine be given (Schedule I and Priorities)?

What is the minimum interval between two univalent varicella or two MMR vaccination visits?

Additional criteria were added to be consistent with the Canadian Immunization Guide, Public Health Agency of Canada, 2006, 7th edition (or as current), for children aged 12-18 years who are school aged and who were not vaccinated between 7 and 17 years of age.

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Measles, mumps, rubella and varicella vaccine (Varilrix®)

Why is the minimum providing of a dose of measles, mumps, rubella and varicella (MMRV) vaccine free of charge for children four to 14 years of age?

Starting August 2013, the second dose of varicella vaccine will still offer MMRV at age five years.

Measles, mumps, rubella and varicella vaccine (Varilrix®)

What are the expanded criteria for receiving a second dose of varicella, mumps, rubella and rubella (MR) vaccine?

A second dose of MR is also recommended for young adults (18-29 years), pregnant secondary students, persons who received killed mumps vaccine (1957-1970), health care workers or those who plan to travel internationally.

MMRV is not recommended for children less than four years of age due to the increased risk of side effects in this age group. PROTECT! To Measles—Quinn. The post-marketing information of the MMRV vaccine, Prevenar® and Varivax® 10 will not get a"dose effect" evidence from the Prevent® study and in consideration of the MMRV vaccine, two doses of MMRV vaccine as a second dose to children who at least 12 months of age. It is highly recommended that children receive the full immunization series for tetanus, mumps, rubella and varicella.

For children who are now 18 months old and due for their second dose of varicella vaccine, should we delay the administration of MMRV vaccine by three weeks? If yes, the second dose of varicella vaccine will be eligible for MMRV at four years of age?

Note: for more detailed information, please consult the Canadian Immunization Guide, 2006, 7th edition (or as current), Public Health Agency of Canada, and the manufacturer’s product monograph.

Schedule

Publicly Funded Immunization

Note: for more detailed information, please consult the Canadian Immunization Guide, 2006, 7th edition (or as current), Public Health Agency of Canada, and the manufacturer’s product monograph.