

## IMMUNISATION HISTORY & CATCH-UP WORKSHEET

Patient name and surname: \_\_\_\_\_ Date of birth/Age: \_\_\_\_\_ Health Status: \_\_\_\_\_

Vaccination History (Valid doses)							Catch-up notes			
Vaccine	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5	Dose 6	Date of last dose given if behind	Number of doses still needed for current age	Product	Catch-up schedule timeframe (interval to next dose) and notes
BCG										
OPV										
RV			A							
DTaP or Tdap-containing vaccines										
Hepatitis B										
PCV										
Measles/MR/MMR	Measles/ MR	Measles/ MR	MMR	MMR <sup>C</sup>						
Hepatitis A										
MenACWY		B								
Varicella		A								
HPV			B							
Notes: <sup>A</sup> Depends on product used; <sup>B</sup> Depends on age of 1 <sup>st</sup> dose; <sup>C</sup> If MMR is used, needs at least 2 doses after 12 months of age.										

By signing below, you certify that the information is true, based on proof of vaccination

Provider name: \_\_\_\_\_ Date: \_\_\_\_\_

## CATCH-UP PLAN

Patient name and surname: \_\_\_\_\_

Visit 1		Visit 2		Visit 3		Visit 4
	Interval to next visit		Interval to next visit		Interval to next visit	

Next scheduled vaccines

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## How to use this worksheet:[7]

1. Record the child's details, including date of birth and current age, at the top of the worksheet.
2. For each vaccine, document the number of doses the child has received including the date of the last dose. Record this in the 'Date of last dose given' column of the worksheet. Include previous vaccinations given in another country if applicable. (Also refer to What is the child's vaccination history?)
3. Take note of the dates that the previous vaccines were administered to ensure that they are valid doses. If a vaccine is given more than 4 days before the minimum age, or more than 4 days before the recommended minimum interval between doses, the vaccine is considered to be an invalid dose and will need to be repeated (see the following link for more information: <https://www.cdc.gov/vaccines/hcp/imz-best-practices/timing-spacing-immunobiologics.html>). When 2 doses of the **same** live vaccines are inadvertently given less than 28 days apart (e.g. 2 MMR doses), the second dose of MMR does not need to be repeated if given less than 4 days before the minimum 28-day interval that is required. However, this does not apply to **different** live vaccines that have been spaced less than the minimum 28-day interval (e.g., MMR and chickenpox vaccine). In this case, the live vaccine given earlier than 28 days after the first live vaccine will need to be repeated a minimum of 28 days later.[52]
4. Check how many doses of each vaccine are required for the child's current age (see Immunisation catch-up schedule). Enter the number of additional doses that are still needed to be administered in the 'Number of doses still needed for current age' column of the worksheet.
5. Assess other factors identified during the pre-vaccination screening that may preclude further vaccination or catch-up of certain vaccines. Examples of this may include anaphylaxis (contraindication for further vaccination with that vaccine), or immunosuppression (contraindication to live vaccines). Certain underlying medical conditions may warrant additional doses of vaccines.
6. In the 'Product' column, document the name of the relevant product(s) appropriate for use in the age group for the specific child. Take special note of the upper age limits for each particular vaccine and its contraindications or precautions.
7. Schedule the next dose at the most appropriate time (at the earliest opportunity) referring to the immunisation catch-up schedule. Refer to spacing inactivated and live vaccines. Record this in the last column together with any further doses that may be required as per the Immunisation catch-up schedule, and the intervals at which they should be administered. You may also want to transfer this information to a catch-up plan (as per the second page of the Immunisation history and catch-up worksheet) and provide the patient with a copy as well.
8. Once the child has received all the relevant catch-up vaccines, continue with the remaining scheduled vaccines as per the recommended vaccination schedule (See EPI and Private vaccination schedules).
9. Draw up a catch-up plan with the return dates and the vaccines due at each visit (see page 2 of the immunisation history and catch-up worksheet)[7]

## Important notes:

- Do not administer vaccines before the minimum age for administration (as per product package insert) or before the minimum interval for administration (as per Immunisation catch-up schedule).[55]
- Ideally, as many relevant vaccines should be administered on the same day when catching up. However, if only one or two vaccines are given at the first visit, a vaccine-preventable disease (VPD) risk-assessment should be done when deciding which vaccines to prioritise with the first visit. Vaccines against diseases that are highly contagious, such as measles, should be prioritised.[55]
- It is never necessary to restart any delayed or interrupted vaccination series.[55]