



تعميم خارجي رقم- External Circular No  
ADPHC - DG / C / ٥٥ / 2019

بشأن

تحديث برنامج التحصين الموسع (تطعيمات الأطفال والمرحلة الدراسية)

Updates of Expanded Program on Immunization (EPI) – Childhood  
and School Vaccination

To: Healthcare Facilities in the Emirate of Abu  
Dhabi  
Insurance Companies

إلى: المنشآت الصحية في إمارة أبوظبي  
شركات التأمين الصحي،

Greetings,,,

تحية طبية وبعد،،،

The Abu Dhabi Public Health Centre (ADCPH) under the Department of Health – Abu Dhabi (DoH) is regularly updating the immunization program based on scientific evidence-based practice and recommendations from the Higher National Immunization Committee and the National Immunization Technical Advisory Group.

يقوم مركز أبوظبي للصحة العامة التابع لدائرة الصحة أبوظبي بتحديث برنامج التحصين دورياً استناداً إلى الممارسات القائمة على الأدلة العلمية والتوصيات المقدمة من اللجنة الوطنية العليا للتحصين والمجموعة الوطنية الفنية الاستشارية للتحصين.

Therefore, kindly be informed the Expanded Program on Immunization (EPI) has been updated, including Childhood and School Vaccination schedules as per the following:

وعليه نود إحاطة الجميع علماً بأنه تم تحديث برنامج التحصين الموسع بما في ذلك جداول تطعيمات الأطفال والمرحلة الدراسية كالتالي:

**First:** Provide three doses of Pneumococcal Conjugate (PCV) vaccine at age of 2, 4 and 6 months. The fourth dose given at 18 months is canceled.

أولاً: إعطاء ثلاثة جرعات من لقاح المكورات الرئوية المرتبطة في عمر الشهرين و4 أشهر و6 أشهر. تُلغى الجرعة الرابعة والتي كانت تُعطى في عمر 18 شهراً.

**Second:** Replace the dose of Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b Vaccine (Tetavalent) given at age of 18 months, with Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b, Injectable Polio Vaccine (DTaP-Hib-IPV).

ثانياً: استبدال جرعة لقاح الدفتيريا والكزاز والسعال الديكي غير الخلوي والهيموفيليس انفلونزا ب (اللقاح الرباعي) والتي تُعطى في عمر 18 شهراً، بجرعة من اللقاح الذي يحتوي على (الدفتيريا والكزاز والسعال الديكي غير الخلوي والهيموفيليس انفلونزا ب وفيرس شلل الأطفال)-DTaP-Hib-IPV.

**Third:** Replace the dose of Diphtheria, Tetanus, acellular Pertussis Vaccine (DTaP) given at Grade 1, with Diphtheria, Tetanus, acellular Pertussis, Injectable Polio Vaccine (DTaP-IPV).

ثالثاً: استبدال جرعة لقاح الدفتيريا والكزاز والسعال الديكي غير الخلوي (اللقاح الثلاثي البكتيري غير الخلوي) والتي تُعطى في الصف الأول، بجرعة من لقاح (الدفتيريا والكزاز والسعال الديكي غير الخلوي وفيرس شلل الأطفال)-DTaP-Hib-IPV.

**Fourth:** Introduce Meningococcal ACYW135 Conjugated Vaccine (MCV4) to all students at Grade 11.

رابعاً: إدراج لقاح المكورات السحائية رباعي التكافؤ (MCV4) لجميع طلبة الصف الحادي عشر.



**Fifth:** Introduce Human Papilloma viruses 9 Valent Vaccine (HPV9), to female students at Grade 8.

**Sixth:** Human Papilloma viruses, Quadrivalent Vaccine (HPV4), will continue to be provided to female students at Grade 11 for three subsequent academic years:

- 2019 – 2020
- 2020 – 2021
- 2021 – 2022

**Seventh:** All vaccinations given in the facility must be documented through online e-notification system: Immunization Information System (IIS) available under the following link:

<https://bpmweb.haad.ae/UserManagement/MainPage.html#!>

**Eights:** Incidents of suspected vaccine adverse events must be reported through e-Notification system: Adverse Event Following Immunization (AEFI) available under the following link:

<https://bpmweb.haad.ae/UserManagement/MainPage.html#!>

For more information, refer to Appendix 1

All providers to adhere to this circular.

**خامساً:** إدراج لقاح فيروس الورم الحليمي تساعي التكافؤ (HPV9) لطالبات الصف الثامن.

**سادساً:** يستمر إعطاء لقاح فيروس الورم الحليمي رباعي التكافؤ (HPV4) لطالبات الصف الحادي عشر لثلاثة أعوام دراسية على التوالي:

- 2020 – 2019
- 2021 – 2020
- 2022 – 2021

**سابعاً:** تسجيل جميع التطعيمات التي يتم إعطاؤها عبر النظام الإلكتروني الخاص بالتطعيمات المتوفر على الرابط التالي:

<https://bpmweb.haad.ae/UserManagement/MainPage.html#!>

**ثامناً:** التبليغ في حال الاشتباه بحالات الآثار الجانبية للتطعيم، عبر النظام الإلكتروني الخاص بالآثار الجانبية الناتجة عن التطعيم (AEFI) على الرابط التالي:

<https://bpmweb.haad.ae/UserManagement/MainPage.html#!>

لمزيد من معلومات يرجى الاطلاع على Appendix 1.

يرجى الاطلاع والعمل بمضمون هذا التعميم.

شاكرين لكم حسن تعاونكم معنا.

Thank you for your cooperation.

مطر سعيد النعيمي

مدير عام مركز أبوظبي للصحة العامة



#### Appendix:

- Expanded Program on Immunization (EPI) Schedule including the latest changes.

#### المرفقات:

- جدول برنامج التحصين الموسع بالتغييرات الجديدة.



## Appendix 1

### Expanded Program on Immunization (EPI) Schedule

Updated in October 2019

	Age Given	Vaccination Type
Childhood Immunization Schedule	Birth	BCG (Bacillus Calmette-Guerin Vaccine)
		HepB (Hepatitis-B Vaccine)
	End of month 2	Hexavalent (Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b, Hepatitis B, and Inactivated Poliovirus Vaccine)
		PCV13 (Pneumococcal Conjugate 13 valent Vaccine) <sup>1</sup>
		RV1 (Rotavirus Monovalent Vaccine) <sup>2</sup>
	End of month 4	Hexavalent (Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b, Hepatitis B, and Inactivated Poliovirus Vaccine)
		PCV13 (Pneumococcal Conjugate 13 valent Vaccine) <sup>1</sup>
		RV1 (Rotavirus Monovalent Vaccine)
	End of month 6	Hexavalent (Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b, Hepatitis B, and Inactivated Poliovirus Vaccine)
		bOPV (Bivalent Oral Polio Vaccine)
		PCV13 (Pneumococcal Conjugate 13 valent Vaccine) <sup>1</sup>
	End of month 12	MMR (Measles, Mumps and Rubella Vaccine)
Var (Varicella Vaccine)		
End of month 18	DTaP-Hib-IPV (Diphtheria, Tetanus, acellular Pertussis, Haemophilus influenzae type b, Injectable Polio Vaccine)	
	bOPV (Bivalent Oral Polio Vaccine)	
	MMR (Measles, Mumps and Rubella Vaccine)	
School Immunization Schedule	Grade 1	DTaP-IPV (Diphtheria, Tetanus, acellular Pertussis, Injectable Polio Vaccine)
		bOPV (Bivalent Oral Polio Vaccine)
		MMR (Measles, Mumps and Rubella Vaccine) <sup>3</sup>
		Var (Varicella Vaccine) <sup>3</sup>
	Grade 8	HPV9 (Human Papillomavirus 9 valent Vaccine) for females only <sup>4</sup>
	Grade 11	Tdap (Tetanus, reduced Diphtheria and acellular Pertussis Vaccine)
		MCV4 (Meningococcal ACYW135 Conjugated Vaccine) <sup>5</sup>
HPV4 (Human Papillomavirus Quadrivalent Vaccine) for females only (3 doses) <sup>6</sup>		

#### 1- Pneumococcal vaccination schedules (refer to Table # 1):

##### a. Healthy children <5 years of age:

- Vaccination schedule is 3 doses given at 2, 4 and 6 months.
- The number of doses required initiating or complete the vaccination series for children with incomplete schedules (refer to Table # 2).
- PCV13 is used in governmental Healthcare facilities; however, the private sector can use PCV10. It is recommended to complete the series with the same vaccine brand, but in case a series cannot be



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completed with the same type of vaccine, the available product of Pneumococcal Conjugate Vaccine should be used.

### b. Children ≤18 years of age at high risk of pneumococcal infection due to one or more of the underlying medical condition/s mentioned in Table # 3:

- Provide PCV13 and PPSV23 as per Table # 4.
- For recommended vaccination schedule for high-risk children ≤ 18 years of age when doses have been delayed or missed, refer to Table # 4.

### c. Preterm birth at <28 weeks gestation:

- PCV13 to be provided as 4 doses given at (2, 4, 6 and 18 months) plus one dose of Pneumococcal Polysaccharide 23 valent Vaccine (PPSV23) at age of 4-5 years. Refer to Table # 4 for vaccination schedule of the children with incomplete schedule.

## 2- Rotavirus:

- RV1 is used in governmental Healthcare facilities, however the private sector can use RV5 (Rotavirus Pentavalent Vaccine). RV5 schedule is 3 doses at 2, 4 and 6 months). It is recommended that the rotavirus vaccine series to be completed with the same product. However, vaccination should not be deferred if the product used for previous doses is not available or is unknown. In this situation, the provider should continue or complete the series with the product available. If any dose in the series was the pentavalent vaccine, or the product is unknown, a total of 3 doses of rotavirus vaccine should be give
- Refer to the Circular No. (DG 42/13) for the vaccine age limitation and doses gabs.

## 3- MMR and Varicella:

- Initiate or complete the schedule for the student who do not have documented 2 doses given after the first birthday with minimum gab of 4 weeks.
- Refer to "HAAD Standard for Childhood and Young adult Immunization" for schedule and minimum gap between doses.

## 4- HPV9

- Schedule for grade 8 students depends on the age of the student when she received the first dose:
  - o Students aged below 15 years should receive 2 doses ONLY, even if the 2<sup>nd</sup> dose is administered after the student age is 15 years or above.
  - o Students aged 15 years and above should receive 3 doses.

5- **MCV4:** Students who have received MCV4 previously are eligible to receive a 2<sup>nd</sup> dose, if 5 years or more have been passed since last dose.

6- **HPV4:** To be provided for grade 11 female students as a catchup schedule until the school academic year 2021/2022.

## Tables:

Table # 1 Pneumococcal Vaccination Schedule for children <5 years of age					
Category	2 months	4 months	6 months	18 months	2-5 years
Healthy children	PCV13 or PCV10	PCV13 or PCV10	PCV13 or PCV10	-	-
Preterm birth at <28 weeks gestation	PCV13	PCV13	PCV13	PCV13	PPSV23 (1 dose of at age of 4-5 years)
All children with a medical condition(s) associated with an increased risk of invasive pneumococcal disease	PCV13	PCV13	PCV13	PCV13	PPSV23 at age of ≥ 2 years



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Table # 2 Pneumococcal conjugate (PCV13 and PCV10) recommended vaccination schedule for healthy children <5 years of age when doses have been delayed or missed				
Age at attendance	Vaccination history	1st dose	2nd dose	3rd dose
3–11 months	0 doses	Give now	1 month later	1 month later
	1 dose	Previously given	Give now (at least 4 weeks after last dose)	1 month later
	2 doses	Previously given	Previously given	Give now (at least 4 weeks after last dose)
12–23 months	0 doses	Give now	2 month later	<b>Not needed</b>
	1 dose	Previously given below one year of age	Give now (at least 8 weeks after last dose)	2 month later
		Previously given above one year of age	Give now (at least 8 weeks after last dose)	<b>Not needed</b>
	2 doses	Previously given	Previously given	Give now* (at least 8 weeks after last dose)
24–59 months	0 doses	Give now	PCV13 Not needed PCV10 (one dose 2 month after the 1st dose)	<b>Not needed</b>
	1 dose	Previously given	PCV13 Give now** (at least 8 weeks after last dose) PCV10 Give now (at least 8 weeks after last dose)	<b>Not needed</b>
	2 doses	Previously given	Previously given	Give now* at least 8 weeks after last dose
<p>* Not required if the previous 2 doses administered at age of 12 months or older with gap of at least 8 weeks.</p> <p>** Not required if the previous dose administered at age of 24 month</p>				



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<b>Table # 3</b> <b>Children at high-risk of invasive pneumococcal infection due to underlying medical condition</b>
<ul style="list-style-type: none"><li>• Functional or anatomical asplenia, including (sickle cell disease, congenital or acquired asplenia).</li><li>• Congenital or acquired immunodeficiency.</li><li>• <u>Immunosuppressive therapy</u> (including <u>corticosteroid</u> therapy <math>\geq 2</math> mg per kg per day of prednisolone or equivalent for more than 1 week) or radiation therapy.</li><li>• Haematological and other malignancies.</li><li>• Solid organ transplant.</li><li>• Haematopoietic stem cell transplant.</li><li>• HIV <u>infection</u> (including AIDS).</li><li>• Chronic renal failure or relapsing or persistent nephrotic syndrome.</li><li>• Cochlear implants.</li><li>• Intracranial shunts.</li><li>• Chronic cardiac disease.</li><li>• Chronic lung disease in preterm infants.</li><li>• Cystic fibrosis.</li><li>• Diabetes.</li><li>• Down syndrome.</li><li>• Chronic liver disease.</li></ul>



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<b>Table # 4</b>			
<b>Vaccination schedule for Children ≤18 years of age at high risk of pneumococcal infection</b>			
Age at diagnosis	Vaccination history of PCV7, PCV10 or/and PCV13	Recommended schedule (doses to be provided)*	
		PCV13	PPSV23
< 7 month	0 doses	4 doses at age of 2, 4, 6 and 18 month, or age-appropriate catch-up schedule	<ul style="list-style-type: none"> <li>– Give 1 dose of PPSV23 at ≥2 years of age with gap of at least 8 weeks after the last dose of PCV13</li> <li>– Give another dose of PPSV23 after 5 years from the first dose, if risk persists,</li> <li>– If PPSV23 has already been given (prior to any doses of PCV13) to children aged under 18 years, wait at least 8 weeks before administering PCV13</li> </ul>
	1 or 2 doses of PCV10	Complete the schedule to 4 doses with PCV13 (PCV13 will replace PCV10 on the schedule).	
	1 or 2 doses of PCV13		
7 – 11 Months	0 doses	2 doses with at least 4 weeks apart, followed by a booster dose at age of 18 months.	
	1, 2 or 3 doses of PCV10	1 dose, followed by a booster dose at age of 18 months.	
	1, 2 or 3 doses of PCV13		
12 – 23 months	0 doses	2 doses with at least 8 weeks gap.	
	4 doses of PCV10 and 0 doses of PCV13	1 dose (no minimum gap to be considered between PCV10 and the 1 <sup>st</sup> dose of PCV13)	
	1, 2 or 3 doses of PCV10	2 doses, with at least 8 weeks gap.	
	1 or 2 dose of PCV13 received below the age of 12 months		
	3 dose of PCV13 received below the age of 12 months	1 dose, at least 8 weeks after the last dose.	
	1, 2, or 3 doses of PCV10	1 dose at least 8 weeks after the last dose.	
	1 dose of PCV13 received after the age of 12 months		
2 doses of PCV13 received after the age of 12 months	Not required		
2 – 18 years	0 doses of PCV13 or any incomplete schedule	1 dose of PCV13, at least 8 weeks after last dose.	

\* For immunocompromised children, provide dose/s as per the treating physician recommendation