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TO: California Vaccines for Children (VFC) Providers
FROM: Robert Schechter, M.D., Chief *Rob Schechter*
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SUBJECT: 2023 ACIP Child and Adolescent Immunization Schedule and other vaccine updates

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Dear VFC provider,

The **2023 Advisory Committee on Immunization Practices (ACIP) [Child and Adolescent Immunization Schedules](#)** have been posted, with full recommendations at [ACIP Recommended Immunization Schedule for Children and Adolescents Aged 18 Years or Younger — US, 2023](#).

Key updates include:

Changes

- **COVID-19:** routine schedule now includes primary and booster doses in immunocompetent and immunocompromised individuals. [ACIP COVID-19 Vaccine Recommendations | CDC](#)
- **Influenza:** Live attenuated influenza vaccine should not be administered to close contacts of immunosuppressed persons who require a protected environment. [ACIP Recommendations — US, 2022–23 Influenza Season | MMWR \(cdc.gov\)](#)
- **Measles, mumps, rubella (MMR):** MMRV added as option in the MMR row.
 - Additional MMR doses recommended during a mumps outbreak. [ACIP Recommendations - Use of a Third Dose of Mumps Virus–Containing Vaccine in Persons at Increased Risk for Mumps During an Outbreak](#) (2018)
- **15-valent pneumococcal conjugate vaccine (PCV 15):** 13-valent pneumococcal conjugate vaccine (PCV13) and PCV15 may be used interchangeably in both healthy children and those with increased risk of invasive pneumococcal disease.



- Language was added to clarify the minimum interval between doses 3 and 4 in a catch-up schedule: “This dose is only necessary for children aged 12–59 months regardless of risk, or aged 60–71 months with any risk, who received 3 doses before age 12 months.” [Use of PCV-15 Among U.S. Children: Updated Recommendations of ACIP — US, 2022 | MMWR \(cdc.gov\)](#)

Clarifications

- **Dengue:** vaccination is NOT recommended for those traveling to or visiting endemic dengue areas (non-residents).
- **Hepatitis B:** Language has been added on recommendations for infants born to mothers who are HBsAg positive or unknown. In addition, Heplisav-B and PreHevbrio may be used for catch-up use in persons aged 18 years and older.
- **Human papillomavirus (HPV):** is not recommended during pregnancy.
- **Meningococcal ACWY:** Menveo one-vial formulation should not be given prior to 10 years of age.
- **Meningococcal B:** If the second dose of Trumenba is administered ≥ 6 months after the first dose, then a third dose is not needed. If the third dose of Trumenba is administered earlier than 4 months after the second dose, then a fourth dose should be administered ≥ 4 months after the third dose.
- **Inactivated polio:** Recommendations have been added for adults at increased risk for exposure to polioviruses. [Polio Vaccination Recommendations for Specific Groups](#) (2022)

USE OF Tdap IN LIEU OF Td

Tdap vaccine is an acceptable alternative to Td vaccine, including for wound management, except in very rare cases of a specific [contraindication to pertussis-containing vaccines](#). Supplies of Td vaccine should be preserved for those with contraindications to pertussis-containing vaccines. CDC recommends that vaccination providers transition to use of Tdap vaccine in lieu of Td vaccine whenever possible: See [Diphtheria, Tetanus, and Pertussis Vaccine Recommendations | CDC](#)

SC OR IM ADMINISTRATION OF MERCK LIVE VIRUS VACCINES

MMRII, ProQuad, and Varivax, all manufactured by Merck, may now be given either subcutaneously OR intramuscularly. A single dose of each vaccine remains at ~0.5mL.

[Package Insert \(Refrigerated\) - ProQuad \(fda.gov\)](#)

[Package Insert - MMRII \(fda.gov\)](#)

[Package Insert - Varivax \(Refrigerator\) \(fda.gov\)](#)

REPORTING SUSPECTED VACCINE ADVERSE EVENTS OR ERRORS

Providers should report suspected adverse events to any vaccine to the Vaccine Adverse Events Reporting System (VAERS) at 800-822-7967 (toll-free) or <http://vaers.hhs.gov>.

Providers should report any vaccine administration error and associated contributing factors to the National Vaccine Errors Reporting Program (VERP) at [Healthcare Practitioner's Vaccine Error Reporting Form | Institute For Safe Medication Practices \(ismp.org\)](#). As a part of the report, providers can make recommendations to prevent errors. This surveillance program aims to prevent errors by identifying trends, creating targeted education, and changing product labeling and design.

ADDITIONAL RESOURCES

- Job aids:
 - Influenza vaccine resources from [CDC](#) and [CDPH](#)
 - COVID-19 vaccine resources from [CDC](#) and [CDPH](#)
 - Pneumococcal catch up schedule: [2023: PCV Catch-up Guidance for Healthy Children 4 months through 4 years of Age \(cdc.gov\)](#)