

**Summary of DTaP and Tdap Vaccine Recommendations across the Lifespan**

<http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm>

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| **Age/Status** | **Recommendations** |
| Birth through 6 years | DTaP is routinely recommended at 2, 4, and 6 months, at 15 through 18 months, and at 4 through 6 years. |
| 7 through 10 years  UPDATED JAN 2011 | Tdap is recommended for children ages 7 through 10 years who are not fully vaccinated ([see note 1](http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm#note1)) against pertussis:   * Single dose of Tdap for those not fully vaccinated ([see note 1](http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm#note1)) **or** * If additional doses of tetanus and diphtheria toxoid-containing vaccines are needed, then children aged 7 through 10 years should be vaccinated according to the [catch-up schedule](http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html#printable), with Tdap preferred as the first dose. |
| 11 through 18 years | Tdap is routinely recommended as a single dose for those 11 through 18 years of age with preferred administration at 11 through 12 years of age.  If adolescent was not fully vaccinated ([see note 1](http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm#note1)) as a child, check the [ACIP recommendations](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5503a1.htm) and [catch-up schedule](http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html#printable) to determine what’s indicated.  If adolescents (13 through 18 years) missed getting Tdap at 11 to 12 years of age, administer at the next patient encounter or sooner if adolescent will have close contact with infants. |
| 19 years and older  UPDATED JUN 2012 | Any adult 19 years of age and older who has not received a dose of Tdap should get one as soon as feasible – to protect themselves and infants. This Tdap booster dose can replace one of the 10-year Td booster doses. Tdap can be administered regardless of interval since the previous Td dose. Shorter intervals between Tdap and last Td may increase the risk of mild local reactogenicity but may be appropriate if your patient is at high risk for contracting pertussis, such as during an outbreak, or has close contact with infants.  When feasible, Boostrix (GSK) should be used for adults 65 years and older; however, either vaccine product administered to a person 65 years or older provides protection and may be considered valid. Providers should not miss an opportunity to vaccinate persons aged 65 years and older with Tdap. Therefore, providers may administer the Tdap vaccine they have available. |
| Pregnant women  UPDATED OCT 2011 | Pregnant women who have not been previously vaccinated with Tdap should get one dose of Tdap during the third trimester or late second trimester. Tdap is recommended in the immediate postpartum period before discharge from hospital or birthing center for new mothers who were not previously vaccinated or whose vaccination status is unknown. By getting Tdap during pregnancy, maternal pertussis antibodies transfer to the newborn, likely providing protection against pertussis in early life, before the baby starts getting DTaP vaccines. Tdap will also protect the mother at time of delivery, making her less likely to transmit pertussis to her infant. DTaP or Tdap (depending on age) is recommended for all family members and caregivers of the infant – at least two weeks before coming into close contact with the infant. |
| Health care personnel ([see note 2](http://www.cdc.gov/vaccines/vpd-vac/pertussis/recs-summary.htm#note2)) | A single dose of Tdap is recommended for health care personnel who have not previously received Tdap as an adult and who have direct patient contact. Tdap vaccination can protect health care personnel against pertussis and help reduce transmission to others. Priority should be given to vaccinating those who have direct contact with babies younger than 12 months of age.  Tdap can be administered regardless of interval since the previous Td dose. However, shorter intervals between Tdap and last Td may increase the risk of mild local reactogenicity. |

Abbreviation: ACIP - [Advisory Committee on Immunization Practices](http://www.cdc.gov/vaccines/acip/index.html)

**Note 1:** Fully vaccinated is defined as 5 doses of DTaP or 4 doses of DTaP if the fourth dose was administered on or after the fourth birthday.

**Note 2:** Health care personnel include but are not limited to physicians, other primary care providers, nurses, aides, respiratory therapists, radiology technicians, students (e.g., medical, nursing, and pharmaceutical), dentists, social workers, chaplains, volunteers, and dietary and clerical workers. For more detailed information, see [Immunization of Health-Care Workers: Recommendations of the Advisory Committee for Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC)](http://www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm).