


BEFORE IMMUNISING

- Always review the [Australian Immunisation Register \(AIR\)](#) to check the patient's previous immunisation history.
- Check the online [Australian Immunisation Handbook](#) or download the Handbook app for information about catch-up immunisation, timing of immunisation for special risk groups.
- Check the correct details of all immunisations are recorded on the AIR as soon as possible after they have been administered (this is a mandatory requirement).

Key: **A** Aboriginal and Torres Strait Islander, **M** Medical Risk, **R** Reconstitute, **SC** Subcutaneous, **IM** Intramuscular, **DL** Deltoid, **AL** Anterolateral Thigh

Adolescent immunisation (also see immunisation for people with medical risk conditions)

Age	Disease	Brand	Reconstitute	Method & Site	Notes
Year 7 students (or age equivalent)	• Human papillomavirus (HPV)	Gardasil 9 [®]		IM / DL	1 dose. Immunocompromised people require 3 doses given at 0, 2 and 6 months.
	• Diphtheria, tetanus and pertussis	Boostrix [®] or Adacel [®]		IM / DL IM or SC / DL	1 dose.
Year 10 students (eligible 15 to 19 years of age inclusive)	• Meningococcal ACWY	Nimenrix [®] or MenQuadfi [®]	R	IM / DL IM / DL	1 dose.
	• Meningococcal B	Bexsero [®]		IM / DL	2 doses administered a minimum of 8 weeks apart.
All ages	• Influenza (specified medical risk conditions)	Age appropriate		Age appropriate	Influenza vaccine: Administer annually. For information on age appropriate vaccines or specified medical risk conditions, refer to the Immunisation Handbook or the annual ATAGI advice on seasonal influenza vaccines. Pneumococcal vaccine: For people with specified medical risk conditions administer a dose of Prevenar 13 at diagnosis followed by 2 doses of Pneumovax 23. Refer to the ATAGI advice to the use and funding of pneumococcal vaccines . Refer to the Immunisation Handbook for dose intervals.
	• Influenza (Aboriginal and Torres Strait Islander)	Age appropriate		Age appropriate	
	• Influenza (funded for all adolescents in 2024 in Queensland)	Age appropriate		Age appropriate	
	• Pneumococcal (specified medical risk conditions)	Prevenar 13 [®] Pneumovax 23 [®]		Age appropriate	

Adult immunisation (also see immunisation for people with medical risk conditions)

Age	Disease	Brand	Reconstitute	Method & Site	Notes
Born during or since 1966	• Measles, mumps, rubella	M-M-R [®] II or Priorix [®]	R R	IM / DL	2 doses. Minimum interval between doses is 4 weeks.
50 years and over	• Pneumococcal (Aboriginal and Torres Strait Islander)	Prevenar 13 [®] and Pneumovax 23 [®]		IM / DL	Administer a dose of Prevenar 13, followed by first dose of Pneumovax 23 12 months later (2–12 months acceptable), then second dose of Pneumovax 23 at least 5 years later. Maximum 2 lifetime doses.
	• Shingles (herpes zoster) (Aboriginal and Torres Strait Islander)	Shingrix [®]	R	IM / DL	Shingrix [®] is a 2-dose course given 2–6 months apart.
65 years and over	• Influenza	Age appropriate		IM / DL	Administer annually. The adjuvanted influenza vaccine is recommended in preference to standard influenza vaccine. For information on age appropriate vaccines refer to the Immunisation Handbook or the annual ATAGI advice on seasonal influenza vaccines.
	• Shingles (herpes zoster)	Shingrix [®]	R	IM / DL	Shingrix [®] is a 2-dose course given 2–6 months apart.
70 years and over	• Pneumococcal (non-Indigenous adults)	Prevenar 13 [®]		IM / DL	1 dose.
Pregnant women	• Diphtheria, tetanus and pertussis	Boostrix [®] or Adacel [®]		IM / DL IM or SC / DL	Pertussis containing vaccine: Single dose recommended each pregnancy, ideally between 20–32 weeks, but may be given up until delivery.
	• Influenza	As appropriate		IM / DL	Influenza vaccine: In each pregnancy, at any stage of pregnancy.
All ages	• Influenza (specified medical risk conditions)	Age appropriate		Age appropriate	Influenza vaccine: Administer annually. For information on age appropriate vaccines or specified medical risk conditions, refer to the Immunisation Handbook or the annual ATAGI advice on seasonal influenza vaccines. Pneumococcal vaccine: For people with specified medical risk conditions administer a dose of Prevenar 13 at diagnosis followed by 2 doses of Pneumovax 23. Refer to the ATAGI advice to the use and funding of pneumococcal vaccines . Refer to the Immunisation Handbook for dose intervals.
	• Influenza (Aboriginal and Torres Strait Islander)	Age appropriate		Age appropriate	
	• Influenza (funded for all persons aged >6 months in 2024 in Queensland)	Age appropriate		Age appropriate	
	• Pneumococcal (specified medical risk conditions)	Prevenar 13 [®] Pneumovax 23 [®]		IM / DL IM or SC / DL	


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Age	Disease	Brand	Reconstitute	Method & Site	Notes
≥ 6 months (annually)	• Influenza	Age appropriate		Age appropriate	Administer annually. For people with specified medical risk conditions that increases their risk of complications from influenza. Refer to the Immunisation Handbook for information on age appropriate vaccines or the annual ATAGI advice on seasonal influenza vaccines.
< 20 months	• Respiratory Syncytial Virus (Nirsevimab)	Beyfortus [®]		IM / AL	For people with specified medical risk conditions that increase their risk of complications from RSV. Refer to the Queensland Health QPRSVP Program page for eligibility criteria and more information.
< 12 months	• Pneumococcal	Prevenar 13 [®]		IM / AL	For people with specified medical risk conditions that increase their risk of pneumococcal disease, an additional (3rd) dose given at 6 months in infancy, followed by a routine booster dose at 12 months (as with other healthy children), then followed by 2 doses of Pneumovax 23. Refer to the ATAGI advice to the use and funding of pneumococcal vaccines .
4 years	• Pneumococcal	Pneumovax 23 [®]		IM / DL	Refer to the Immunisation Handbook for dose intervals.
≥ 12 months	• Pneumococcal	Prevenar 13 [®] Pneumovax 23 [®]		IM / DL IM / DL	For people with specified medical risk conditions that increase their risk of pneumococcal disease, administer a dose of Prevenar 13 at diagnosis followed by 2 doses of Pneumovax 23. Refer to the ATAGI advice to the use and funding of pneumococcal vaccines . Refer to the Immunisation Handbook for dose intervals.
12 months	• Hepatitis B	HB-VaxII paediatric [®] or Engerix B paediatric [®]		IM / DL	Preterm (<32 weeks gestation) and/or low birth weight (<2000g) infants should receive 5 doses of hepatitis B vaccine including an additional dose at 12 months of age.
≥ 5 years	• <i>Haemophilus influenzae</i> type B (Hib)	Act-Hib [®]	R	IM / DL	For people with asplenia or hyposplenia, a single dose is required if the person was not vaccinated in infancy or incompletely vaccinated. (Note that all children aged <5 years are recommended to complete Hib vaccination regardless of asplenia or hyposplenia).
≥ 18 years	• Shingles (herpes zoster)	Shingrix [®]	R	IM / DL	2 doses, 1–2 months apart. Immunocompromised people aged 18 years and older with the following medical conditions: haemopoietic stem cell transplant, solid organ transplant, haematological malignancies, advanced or untreated HIV.
All ages	• Meningococcal ACWY • Meningococcal B	Nimenrix [®] Bexsero [®]	R	Age appropriate Age appropriate	For people with asplenia, hyposplenia, complement deficiency and those undergoing treatment with eculizumab. Refer to the Immunisation Handbook for dosing schedule. The number of doses required varies with age.

- The National Immunisation Program (NIP) provides the above routine vaccinations free to infants, children, adolescents, and adults who have, or are eligible for a Medicare card.
- All people (including refugees and humanitarian entrants) less than 20 years of age are eligible for NIP vaccines missed in childhood, except for HPV which is available free up to and including age 25. The vaccines and doses funded for catch-up is different for people aged less than 10 years, and those aged 10–19 years. Refer to the [Immunisation Handbook](#) for timing of doses.
- Refugees and humanitarian entrants aged 20 years and over are eligible for the following vaccines if they were missed: diphtheria-tetanus-pertussis, chickenpox, poliomyelitis, measles-mumps-rubella and hepatitis B, as well as HPV (up to and including age 25). Refer to the [Immunisation Handbook](#) for timing of doses.
- If individuals have received Zostavax through the NIP, they will need to wait 5 years before accessing Shingrix for free. If individuals have received Zostavax privately, they are eligible to receive Shingrix. An interval of 12 months is recommended from the date of Zostavax vaccination.
- Japanese encephalitis vaccine is also funded for certain individuals. Eligibility and criteria can be found on the [Japanese encephalitis Health Condition Directory](#).