

# GP MINI SCRIPT

DEPARTMENT OF  
PUBLIC HEALTH  
EHSSB

## NEW VACCINE SCHEDULE FROM SEPTEMBER 2004

WHEN TO IMMUNISE	DISEASE VACCINE PROTECTS AGAINST	HOW IT IS GIVEN
2, 3, and 4 months old	Diphtheria, tetanus, acellular pertussis, inactivated polio and Hib Tradename: Pediacel( DTaP IPV/ Hib)	One injection
	Meningitis C	One injection (Record site)
Around 15 months	Measles mumps and rubella	One injection
3-5 years i.e. Pre-school	Diphtheria, tetanus, acellular pertussis and inactivated polio Tradenames: Repevax(dTaP / IPV) or Infanrix IPV(DTaP/IPV)	One injection
	Measles mumps and rubella	One injection (Record site)
10-14 years old (and sometimes shortly after birth)	Tuberculosis (BCG vaccine)	Skin test followed by one injection, if needed
14-18 years old i.e. School-leaving	Tetanus, diphtheria and inactivated polio Tradename: Revaxis (Td / IPV)	One injection
	MMR if have not had two previous doses	One injection (Record site)

**Remember - its never too late to catch up - no need to restart.  
Seek further advice before withholding immunisation  
Telephone: EHSSB Department of Public Health Medicine (028) 9055 3955**

## WOUNDS, TETANUS VACCINE, AND IMMUNOGLOBULIN 2005

CLEAN WOUND		TETANUS PRONE WOUND	
Immunisation Status	Vaccine	Vaccine	Human tetanus Immunoglobulin
Fully immunised ie five doses of vaccine at appropriate intervals	None required	None required	Only if high risk (see text)
Primary immunisation complete, boosters incomplete but up to date	None required (unless next dose due soon and convenient now)	None required (unless next dose due soon and convenient now)	Only if high risk (see text)
Primary immunisation incomplete or boosters not up to date	A reinforcing dose of vaccine and further doses as needed to complete schedule (for future immunity)	A reinforcing dose of vaccine and further doses as needed to complete schedule (for future immunity)	Yes: one dose of human tetanus immunoglobulin in a different site
Not immunised or immunisation status not known or uncertain	-An immediate dose of vaccine -Check records (if needed) -Complete full 5-dose course (for future immunity)	-An immediate dose of vaccine -Check records (if needed) -Complete full 5-dose course (for future immunity)	Yes: one dose of human tetanus immunoglobulin in a different site

### Thorough cleaning of wounds is essential.

#### Tetanus-prone wounds include:

- wounds or burns that require surgical intervention and when that treatment is delayed for more than six hours
- wounds or burns that show any of the following characteristics: a significant degree of devitalised tissue, puncture-type injury particularly in contact with soil or manure
- wounds containing foreign bodies
- compound fractures
- wounds or burns in patients who have systemic sepsis.

If the wound, burn or injury is high risk - heavy contamination with material likely to contain tetanus spores, and/or extensive devitalised tissue – give human tetanus immunoglobulin for immediate protection, irrespective of tetanus immunisation history.

Tetanus vaccine may not boost immunity early enough to protect against current risk but will protect against future exposure.

Manage patients who are immunosuppressed as if they were incompletely immunised, as they may not be adequately protected.

If immunisation status is uncertain, or if born before 1961 (who may not have been immunised in infancy), a full course of immunisation may be required.

Injecting drug users may be at risk from tetanus-contaminated illicit drugs, especially when they have sites of focal infection. Give booster doses if there is any doubt about their immunisation status.

**Full details - September 2004 version of green book - [www.immunisation.org](http://www.immunisation.org)**