

The Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP) discussed and approved multiple changes in the 2011 immunization charts for both children and adults on Thursday.

William Atkinson, MD, of the CDC's National Center for Immunization and Respiratory Diseases, discussed the changes to the charts for ages 0-18 years with the important caveat that the changes did not include the recommendations from Wednesday's meeting with regard to [meningococcal](#) and [tetanus, diphtheria, and pertussis \(Tdap\)](#) immunizations.

The changes are slated to be published in the January issue of the CDC's *Morbidity and Mortality Weekly Report (MMWR)*, said Dr. Atkinson, "but because of yesterday's additions, and assuming everyone agrees, we are going to move towards publication in February instead of January."

Recommended Changes for Children

The 2011 schedule changes for ages 0-6 years, not including yesterday's additions, included 4 changes: (1) revision of wording regarding a sidebar, (2) added guidance on the hepatitis B vaccine schedule for children who did not receive a birth dose, (3) added information on the use of 13-valent pneumococcal conjugate vaccine (PCV13), and (4) guidance on administration of 1 or 2 doses of influenza vaccine based on the child's history of H1N1 influenza infection.

Regarding the sidebar note rewording, the sidebar currently states "recommended ranges for all children except certain high-risk groups." The words "except certain high-risk groups," were added in error and will be deleted from the 2011 child charts, Dr. Atkinson said at the meeting.

The second change is an addition of a hepatitis B footnote, which will state that "infants who did not receive a birth dose should receive 3 doses of HepB on a schedule of 0, 1, and 6 months."

There was also a consolidation of the wording about the age for the last dose, which now will state "the final (3rd or 4th) dose in the HepB series should be administered no earlier than age 24 weeks."

According to Dr. Atkinson, the addition of information on the use of PCV13 was the most substantial change, and it reflects the recommendations listed in the September 3, 2010 issue of the *MMWR*. "Basically, they address the supplemental dosing of PCV13 in children who have already received the PCV7 series," he said.

The fourth change pertains to vaccination against influenza. The 2011 chart will include a new footnote that "children aged 6 months through 8 years who received no doses of monovalent 2009 H1N1 vaccine should receive 2 doses of 2010-2011 seasonal influenza vaccine."

For the 2011 chart, ages 7 through 18 years, the changes will be similar to the ones for the 0 through 6 years chart, but will also include the addition of the word "female" (already included in the adult chart) to the human papillomavirus (HPV) vaccine recommendation in the grid and also in footnote 2.

Recommended Changes for Adults

Dr. Abigail Shefer, MD, also with the CDC's National Center for Immunization and Respiratory Diseases, described the changes to the 2011 immunization schedule for adults.

The changes include incorporation of the universal influenza vaccination recommendation as a footnote, a reordered list of vaccines so that all universally recommended vaccines are listed together (ie, influenza, Td/Tdap, varicella, HPV, and herpes zoster), and a revised Td/Tdap row to reflect the new expanded age recommendation (in anticipation of yesterday's vote).

There were also several changes to existing footnotes, including removing language regarding the interval between Td and Tdap vaccinations and use of Tdap in people older than 65 years (in anticipation of yesterday's vote), consolidated language regarding measles, mumps, rubella (MMR) vaccination, clarification of language regarding revaccination with PPSV ("ages 19-64 years" added), and a description of the meningococcal vaccine as being quadrivalent.

The panel voted unanimously to incorporate all changes for both the child and adult 2011 immunization schedules.

More information on ACIP is available on the [CDC Web site](#).