Guidelines for DTaP Immunization of Infants and Young Children With Histories of Convulsion(s)

Personal History of Convulsions?

YES

Medical evaluation determines that a neurological condition is evolving

YES

1. If less than one year of age, defer DT or DTaP (risk of diphtheria and tetanus is remote)
2. Reconsider need for immunization with each visit.
3. At or before 1st birthday, if neurological condition is resolved, corrected or controlled?

YES

Give DTaP

NO

Give DT*

NO

If greater than one year of age, complete immunization with DT*

NO

May administer DTaP

In stable neurological conditions** (such as developmental delay or cerebral palsy) or if condition is resolved, corrected, or controlled, may vaccinate with DTaP. Use of acetaminophen at the time of immunization and every four hours for the ensuing 24 hours should be considered.

**This includes infants and children with well-controlled seizures or those in whom a seizure is unlikely to recur.

A history of convulsion within three days of a previous dose of DTP or DTaP is not a contraindication but a precaution. In such cases, the benefit versus the risks of DTaP must be carefully considered.

* For infants and children who received DT but who on further evaluation can be given pertussis vaccine, DTaP can be used, ideally as a series of 3 or more doses. However, in general, children <7 years of age should not receive more than 6 doses of diphtheria and tetanus-containing vaccines. If severe local reaction occurs, further administration of DT-containing vaccines should be reconsidered.