

Tdap

Age Group	Dose	Route	# of Doses	Storage & Handling
10-64 years* Recommended Off-Label Use of Tdap Children 7-9 years of age 65 years and older if close contact to an infant	0.5 mL	IM (Intramuscularly)	Single lifetime dose	Keep vaccine refrigerated between 36°- 46° F DO NOT FREEZE

* Boostrix® is licensed in the U.S. for children aged 10 years and over, however Adacel® is licensed for children starting at age 11 years. Either vaccine may be used to vaccinate children 7-10 years and adults 65 years and older.

Tdap Vaccine Recommendations

ACIP Recommendations

A single dose of Tdap is recommended for:

- All adolescents aged 11 through 18 years (preferably at aged 11 - 12 years) who have completed the recommended childhood diphtheria, tetanus toxoids and pertussis (DTP/DTaP) vaccination series.
- All adults aged 19 years and older not previously vaccinated with Tdap should receive a single dose.
- **Catch up schedule:** Children aged 7 through 10 years who are not fully vaccinated against pertussis (fewer than 4 doses or have had 4 doses of DTaP and last dose was prior to age 4 years) should receive a single dose of Tdap followed by Td doses. **Children ages 7 through 10 years who received Tdap as part of the catch-up schedule, should receive another dose of Tdap at age 11-12 years. ***
- **Inadvertent Administration of Tdap**
 - **Children 2 months – 6 years:** If Tdap is administered inadvertently instead of DTaP as any one of the first 3 doses of the series, the Tdap dose should not be counted as valid, and a replacement dose of DTaP should be administered as soon as possible. Subsequent doses of DTaP should be administered according the routine schedule.
 - If Tdap is administered inadvertently as the 4th or 5th dose, the Tdap dose should be counted as valid; a child who received Tdap as a fourth dose should complete the pediatric DTaP schedule, then receive Tdap at age 11 – 12 years.
 - **Children aged 7 – 10 years who are fully vaccinated**.** If Tdap is administered inadvertently, the Tdap dose **should not** be counted as valid. The adolescent Tdap dose should be administered as recommended at 11 – 12 years.
- **Timing of Tdap**
Tdap can be administered at any time regardless of interval since the last tetanus – or diphtheria-toxoid containing vaccine.

** *Fully vaccinated is defined as having received 5 valid doses of DTaP or 4 valid doses of DTaP if the 4th dose was administered on or after the 4th birthday.*

Tdap for persons ≥7 years without a history of DTaP/DTP or unknown vaccination series

Persons 7 years and older without documentation of having a series of DTaP/DTP/DT/Td should receive 3 vaccinations:

- Tdap
- Td – 4 weeks after Tdap
- Td – 6 – 12 months after Td
- *Tdap at age 11 – 12 years **only** if first dose of Tdap was given at age 7 – 10 years as part of the catch – up schedule.**

Adverse Reactions

- Local reactions (pain, redness, swelling).
- Temp of 100.4°F or higher.
- tetanus toxoid administration.

Recommendations for Priority Groups

Women of Childbearing Age/Pregnant Women

- All women of childbearing age should be vaccinated with a single dose of Tdap if not received during adolescence.
- All pregnant women, including pregnant adolescents, should receive a single dose of Tdap during *each* pregnancy, irrespective of when the last Tdap was received. Preferably, Tdap should be given in the late second or third trimester (27 to 36 weeks gestation) to maximize the maternal antibody response and passive antibody transfer to the infant. Transplacental transfer of maternal pertussis antibodies from mother to infant may provide protection against pertussis in early life, before the baby begins the primary DTaP series.
- If a woman did not receive Tdap during her current pregnancy and has never received a dose of Tdap (i.e. during adolescence, adulthood, or previous pregnancy), administer a dose of Tdap in the immediate post – partum period.
- Pregnant women with unknown or incomplete tetanus vaccination status should receive three vaccinations containing tetanus and reduced diphtheria toxoids.

Close Contacts of Infants

- All close contacts of infants less than 12 months of age (e.g., parents, siblings, grandparents, childcare workers and health care personnel) who have never received Tdap, should be vaccinated. Ideally, close contacts should be vaccinated 2 weeks before beginning close contact with the infant.

Health Care Personnel

- All health care personnel, particularly those who have direct contact with infants and pregnant women should be immunized with Tdap to protect their patients and themselves, regardless of their age and time since last Td.

Patients with Wounds

- Administer Tdap once (instead of Td or TT) if tetanus toxoid is indicated for wound management in patients 7 years of age and older, including persons 65 and older.

Contraindications	Precautions
Severe allergic reaction to a vaccine component or following a prior dose of vaccine.	History of Guillain-Barre syndrome within 6 weeks after a previous dose of tetanus toxoid-containing vaccine.
Encephalopathy not due to another identifiable cause occurring within 7 days after vaccination with a pertussis-containing vaccine.	Progressive neurologic disorder until the condition has stabilized.
	History of a severe local reaction (arthrus) following a prior dose of a tetanus and/or diphtheria toxoid-containing vaccine.
	Latex allergy for Boostrix supplied in pre-filled syringes (do not use if there is a history of a severe [anaphylactic] allergy to latex; can use if less severe allergies). Neither Boostrix nor Adacel single dose vials contain latex.
	Acute moderate or severe illness with or without fever.

Reference: Liang, J.L., Tiwari, T., Moro, P., et al. Prevention of Pertussis, Tetanus, and Diphtheria with Vaccine in the United States: Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR Recomm Rep 2018;67(No. RR-2):1 – 44. Retrieved on 7/18/18 from <https://www.cdc.gov/mmwr/volumes/67/rr/rr6702a1.htm>