IMMUNISATION SCHEDULE

Vaccinations and passive immunisations.

Vaccinations and passive immunisations should be carried out at the earliest possible opportunity.

An assessment of the vaccination status is sensible and helpful at any age. Missing vaccinations should be caught up with immediately in accordance with the recommendations for the relevant age group.

Recommendations of the **Standing Committee on Vaccination**

(STIKO), 2025. www.stiko.de







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- RSV (monoclonal antibodies): Individuals born between April and September should receive Nirsevimab in the autumn prior to the start of their 1st RSV season. Newborns of any gestational age who were born during the RSV season (mostly between October and March) should receive Nirsevimab as soon as possible after birth, ideally upon discharge from the maternity unit or at the U2 examination (3rd 10th day of life).
- Rota: First vaccine dose as early as the age of 6 weeks; depending on the vaccine used 2 or 3 vaccine doses at an interval of at least 4 weeks.
- TdaPHiblPV/HepB/Pnc: Premature infants: Additional vaccine dose at the age of 3 months, i.e. a total of 4 vaccine doses.
- d TdaPHibIPV/HepB/Pnc: Minimum interval from the previous dose: 6 months.
- MenB: 3 doses at the age of 2 to 23 months; from the age of 24 months, the vaccination series consists of 2 doses.
- **(i) HPV:** Two vaccine doses at least 5 months apart; in the case of a catch-up immunisation starting at an age ≥ 15 years old or a vaccination interval of < 5 months between the 1st and 2nd dose, a 3rd dose is necessary.
- **Td(ap):** Td booster vaccination every 10 years. The next scheduled Td vaccination should be a 1-time dose as a Tdap, or, with the appropriate indication, as a Tdap-IPV combination vaccination.
- MMR: One-time vaccination with an MMR vaccine for all persons born after 1970 ≥ 18 years old with an ambiguous vaccination status, without prior vaccination or with only one vaccination during childhood.
- **Pnc:** Recommended with PCV20
- **(1) COVID19:** For the protection of individuals without an underlying disease, (at least) 3 antigen contacts are required, at least one of which must be a vaccination.
- (3 H. zoster: Double vaccination with the adjuvant inactivated herpes zoster vaccine at least 2 to no more than 6 months apart.
- RSV (vaccination): 1-time vaccination with a protein-based RSV vaccine in the late summer/autumn prior to the start of the RSV season
 - * Vaccinations can be spread over multiple vaccination appointments. MMR and V can be administered at the same appointment or after a 4-week interval.

Next vaccination appointment





