

MINISTRY OF HEALTH AND SANITATION CH/EPI PROGRAM



Vaccine Administration Schedule for Children 0 – 15 months

VACCINES	No of doses	Recommended Age	Dosage	Site of Administration	Route of Administration
BCG	1	At Birth	0.05 mls	RIGHT Upper Arm	Intradermal
Oral Polio Vaccine (OPV)	4	At Birth 6 Weeks 10 Weeks 14 Weeks	2 drops	Mouth	Oral
Pentavalent (DPT + Hepatitis B + Hib)	3	6 Weeks 10 Weeks 14 Weeks	0.5 mls	LEFT Outer Thigh	Intramuscular (IM)
Pneumococcal Conjugate Vaccine (PCV-13)	3	6 Weeks 10 Weeks 14 Weeks	0.5 mls	RIGHT Outer Thigh	Intramuscular (IM)
Rota	2	6 Weeks 10 Weeks	1.5 mls	Mouth	Oral
Inactivated Polio Vaccine (IPV)	1	14 Weeks	0.5 mls	RIGHT Outer Thigh at 2.5 cm from PCV injection site	Intramuscular (IM)
Yellow Fever	1	9 Months	0.5 mls	RIGHT Upper Arm	Subcutaneous (SC)
Measles Containing Vaccine (MCV)	2	9 Months 15 Months	0.5 mls	LEFT Upper Arm	Subcutaneous (SC)

Vaccine Vial Monitor (VVM) Stages



Stage 1: Vaccine OK



Stage 2: Vaccine OK but use first



Stage 3: Do not use the Vaccine



Stage 4: Do not use the Vaccine

STAGE 1: Inner Square is lighter than color of the outer ring and the expiry date has not been passed. **OK to use** the Vaccine

STAGE 2: At a later time, Inner Square is still lighter than the outer ring and the expiry date has not been passed. **OK to Use** the Vaccine

STAGE 3: The inner Square matched the color of the outer ring, the vaccine. The vaccine has reached discard point. **DON'T USE** the vaccine

STAGE 4: The inner Square is darker than the outer ring, the vaccine is beyond discard point. **DON'T USE** the vaccine

