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Ministry of Health and Family Welfare
Government of India

General Information on Routine Vaccines Under Universal Immunization Programme for Citizens

Routine vaccinations

The National Immunisation Schedule (NIS) outlines recommended vaccines that are available free under the Universal Immunisation Program (UIP).

National Immunization Schedule (NIS)

Age	Vaccines Given
Birth	• Bacillus Calmette Guerin (BCG) vaccine • Oral Polio Vaccine (OPV)-0 dose • Hepatitis-B vaccine birth dose
6 weeks	• Oral Polio Vaccine (OPV)-1st dose • Pentavalent-1st dose# • Rotavirus Vaccine (RVV)-1st dose • Fractional dose of Inactivated Polio Vaccine (fIPV)-1st dose • Pneumococcal Conjugate Vaccine (PCV) -1st dose
10 weeks	• Oral Polio Vaccine (OPV)-2nd dose • Pentavalent-2nd dose# • Rotavirus Vaccine (RVV)-2nd dose
14 weeks	• Oral Polio Vaccine (OPV)-3rd dose • Pentavalent-3rd dose# • Rotavirus Vaccine (RVV)-3rd dose • Fractional dose of Inactivated Polio Vaccine (fIPV)-2nd dose • Pneumococcal Conjugate Vaccine (PCV) -2nd dose
9-11 months	• Measles & Rubella (MR) vaccine-1st dose • Pneumococcal Conjugate Vaccine (PCV) –Booster dose • Fractional dose of Inactivated Polio Vaccine (fIPV)-3rd dose • Japanese Encephalitis vaccine-1st dose*
16-23 months	• Measles & Rubella (MR) vaccine-2nd dose • Diphtheria, Pertussis & Tetanus (DPT) vaccine-Booster-1 • Oral Polio Vaccine (OPV)-Booster dose, • Japanese Encephalitis vaccine -2nd dose*
5-6 years	• Diphtheria, Pertussis & Tetanus (DPT) vaccine-Booster-2
10 years	• Tetanus & adult Diphtheria (Td) vaccine
14 years	• Human Papilloma Virus (HPV) vaccine
16 years	• Tetanus & adult Diphtheria (Td) vaccine
Pregnant Mother	• Tetanus & adult Diphtheria (Td) vaccine 1, 2 or Booster**

Pentavalent vaccine is a vaccine that contains five antigens (Diphtheria + Pertussis +Tetanus+ Hepatitis B + Haemophilus influenzae type b)
* JE in endemic districts
** One dose if previously vaccinated within 3 years

Getting vaccinated

Most childhood immunisations are given as an injection in the arm or leg, except rotavirus vaccine and polio drops, which are given orally.

A vaccine dose may protect against one specific disease, or several diseases using a combination vaccine which helps reduce the number of injections your child needs.

There is no need to skip or delay a vaccination visit due to a mild illness such as a runny nose or slight cold.

During the visit, your vaccination provider will ask some questions (for e.g. “is your child well today?” or “Did your child had any medical issues following the previous vaccination?”) to check that there are no concerns in vaccinating your child?

Vaccinate on time

It is important to vaccinate on time to give your child the best protection against harmful diseases. Follow the national immunisation schedule and set a reminder to take your child for next vaccinations.

If your child is overdue or has missed a scheduled vaccination, speak to your area ANM or ASHA about catching up.

Even if some doses due in the first year of life were missed, it is OK to approach your ANM to get the catch up or missed doses as soon as possible.

Vaccines are safe

All vaccines available in India have been assessed by the Central Drugs Standard Control Organisation (CDSCO) under Directorate General of Health Services, Ministry of Health & Family Welfare, Government of India to ensure they are safe and effective before they are approved for use. Their safety continues to be monitored once in use.

All vaccines used in India provide benefits that far outweigh any risks. It is safer to be vaccinated than get the disease.

Where to get vaccinated

Children can get their vaccinations from the following session sites at Government Health Facilities:

- Delivery Points (hospitals) - birth doses
- Fixed Sessions at government health facilities
- Outreach Sessions in the community.

You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

Multiple vaccinations

It is safe to give babies and children several vaccines at a single visit. Their immune systems can react appropriately to multiple vaccines at the same time to provide a strong immunity against multiple diseases and can handle multiple vaccines.

In fact, these will strengthen your baby's immunity to protect them from diseases when they are most at risk.

Side effects

Your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.

Common reactions are mild and self-resolving such as:

- pain, swelling and redness at the injection site
- irritability
- mild fever.

Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.

Serious reactions to vaccines are rare. If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility. You will be requested to wait at the session for 30 minutes following the vaccination to observe for and manage any side effects, which may rarely occur soon after vaccination.

Vaccination records

Your child's vaccinations should be recorded in U-WIN portal from the birth by the vaccination provider.

You can get your child's Immunisation History and their vaccination certificate from U-WIN:

- Go to https://uwin.mohfw.gov.in/home and sign in to access your U-WIN account or use the U-WIN Citizen mobile app available on Android Play Store as well as iOS App Store.

Children vaccinated in different States/UTs

If your child was vaccinated in a different State/UT, take their immunisation records to the nearest ANM/ASHA so that they can:

- Check her/his status of immunisations against the National Immunisation Program Schedule
- Administer missing vaccine doses
- Update the vaccination records in U-WIN.

MORE INFORMATION

Talk to your local ANM/ASHA

Visit https://uwin.mohfw.gov.in/home

Contact your nearest Government Health Facility

Ministry of Health & Family Welfare

Government of India

Vaccine Profile – BCG

Introduction

BCG (Bacillus Calmette-Guérin) vaccine protects children against tuberculosis (TB), a bacterial infection affecting the lungs and other organs. The BCG vaccine is highly effective in preventing severe forms of childhood TB, including brain tuberculosis, TB affecting the entire lungs, and TB affecting multiple organs of the body.

BCG vaccine is most effective when administered shortly after birth, as TB exposure can occur early in life. The vaccine does not prevent primary infection or reactivation of latent pulmonary TB, but is effective in preventing severe TB in children.

When to get vaccinated?

- One dose of BCG vaccine is recommended at the age of:
    - **Birth (preferably within 24 hours of birth)** along with other co-administered vaccines namely, Hepatitis-B vaccine and Oral Polio Vaccine (OPV). If not vaccinated at birth, BCG can be given as early as possible until one year of age (before the first birthday).
    - The standard dose of BCG vaccine is 0.05 mL of the reconstituted vaccine for infants aged up to 1 month, and 0.1 mL for infants aged >1 month to 1 year.

Who should not get vaccinated?

The vaccine should not be given if:

- The child has symptomatic HIV/AIDS or other severe immunodeficiency.
- The infant has generalized skin infections or is seriously ill.

What is the route and site of administration of this vaccine?

- Intra-dermal Injection, on the left upper arm

Where to get this vaccine?

- This vaccine is provided at all government health facilities, especially at delivery points (hospitals).
  - ➢ At birth: administered in delivery point (hospital where the infant was born).
  - ➢ At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

BCG is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.

Common reactions are mild and self-resolving such as redness, swelling, and a small sore at the injection site. This may ulcerate and heal over a few weeks, leaving a scar. This is a normal reaction to the vaccine. Do not cover/bandage the sore/ulcer. Do not apply any ointment or oil or powder over it. Keep it open and dry. A scar usually develops at the site of injection in 4–6 weeks and indicates successful vaccination. Absence of a scar does not necessarily mean vaccine failure.

Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids and removing layers of clothing to manage the fever. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.

Serious reactions to vaccines are rare which include swelling of lymph nodes in the armpit or neck and abscess formation, disseminated BCG infection (especially in immunocompromised infants). These reactions do not occur immediately after vaccination and will occur a few weeks to months after vaccination.

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

- **Wait for at least 30 minutes post-vaccination**. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.
- Do not rub/bandage the injection site.
- Seek immediate care for:
  - High fever (>39°C), prolonged crying, or signs of infection (e.g., pus).
  - Persistent swelling of lymph nodes (>3 weeks).

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Hepatitis B Vaccine

Introduction

Hepatitis B is a viral infection of the liver caused by the Hepatitis B virus (HBV). It can lead to chronic liver disease, cirrhosis, and liver cancer, and is a significant public health concern in India. HBV is transmitted through contact with infected blood and other body fluids, from mother to child at birth, and through unsafe injections or sexual contact.

The Hepatitis B vaccine is safe and effective in preventing mother-to-child transmission of HBV infection, when administered early, especially within 24 hours of birth. The Hepatitis B vaccine not only prevents individual illness but also contributes to public health by reducing disease transmission and long-term healthcare costs to treat chronic complications.

When to get vaccinated?

- One dose of Hepatitis-B vaccine is recommended at:
    - **Birth (preferably within 24 hours of birth)** along with other co-administered vaccines namely, BCG vaccine and Oral Polio Vaccine (OPV).
    - **6 week (1.5 month), 10 week (2.5 month), and 14 week (3.5 month)** as part of Pentavalent vaccine.

Who should not get vaccinated?

- Vaccination should be delayed in infants with moderate or severe acute illness.

What is the route and site of administration of this vaccine?

- Intramuscular injection, left mid-thigh

Where is this vaccine being provided?

- Hepatitis-B vaccine is administered within 24 hours of birth at the health facility where the child was delivered.
- Subsequent doses as part of Pentavalent vaccine are provided at Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the next age-appropriate vaccination as per your choice.

What are the possible side effects?

- Hepatitis-B vaccine is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.

  Common reactions are mild and self-resolving such as mild fever, pain, and swelling at the injection site. Mild reactions can be managed by giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever, and crying after vaccination.

- Serious reactions to vaccine are rare, which include severe allergic reaction (anaphylaxis)

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Polio Vaccine:

(OPV & IPV)

Introduction

Poliomyelitis, commonly known as polio, is a highly infectious viral disease that primarily affects children under five years of age. It affects the nervous system and can cause irreversible paralysis or even death within hours.

Protection against polio is provided by administering oral polio vaccine and injectable polio vaccine under the Universal Immunization Programme (UIP).

The Oral Polio Vaccine (bOPV) (against type 1 and 3 poliovirus strains) provides mucosal immunity that interrupts transmission (through vaccination in routine immunization and campaigns), while Inactivated Polio Vaccine (IPV) boosts systemic immunity, against type 1,2 and 3 poliovirus strains. The combined use of these vaccines strengthens population immunity and ensures long-term protection.

When to get vaccinated?

- **Oral Polio Vaccine (OPV):** One birth dose, three primary doses and one booster dose of OPV vaccine are recommended at:
    - **Birth (preferably within 24 hours of birth)** along with other co-administered vaccines namely, Hepatitis-B vaccine and BCG (Bacillus Calmette-Guérin) vaccine or up to 15 days after birth.
    - **6 weeks (1.5 months)** along with other co-administered vaccines namely Pentavalent vaccine, Rotavirus vaccine (RVV), Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).
    - **10 weeks (2.5 months)** along with other co-administered vaccines namely Pentavalent vaccine, Rotavirus vaccine (RVV)
    - **14 weeks (3.5 months)** along with other co-administered vaccines namely Pentavalent vaccine, Rotavirus vaccine (RVV), Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).

    - **16-23 months** along with other co-administered vaccines namely Diphtheria, Pertussis & Tetanus (DPT) vaccine, Measles-Rubella Vaccine and Japanese Encephalitis vaccine (JE-in selected districts only).

- Oral Polio Vaccine (OPV) can be given until 5 years of age.
- During Pulse Polio rounds, an extra dose of Oral Polio Vaccine (OPV) is administered to all children under 5 years of age to ensure maximum community immunity, regardless of previous vaccination status.

- **Fractional Inactivated Polio Vaccine (fIPV):** Three doses of fIPV vaccine are recommended at:
    - **6 weeks (1.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Rotavirus vaccine (RVV), and Pneumococcal Conjugate Vaccine (PCV)
    - **14 weeks (3.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Rotavirus vaccine (RVV), and Pneumococcal Conjugate Vaccine (PCV)
    - **9 to 11 months** along with other co-administered vaccines namely Measles-Rubella (MR) vaccine, Pneumococcal Conjugate Vaccine (PCV), and Japanese Encephalitis vaccine (JE-in selected districts only).
- fIPV vaccine can be given till one year of age. If the child has already received one or two doses of Fractional Inactivated Polio Vaccine **(**fIPV) before 1 year of age, the missed doses can be given with a gap of 2 months between the doses.

Who should not get vaccinated?

- **Oral Polio Vaccine (OPV):** Children with immunodeficiency or close contacts of immunocompromised individuals.
- **Inactivated Polio Vaccine (IPV):** Those with a severe allergic reaction to a previous dose or vaccine component.
- Children with moderate or severe illness should postpone vaccination until recovery.

What is the route of administration of this vaccine?

- **OPV:** Oral drops

- **f-IPV:** intradermal injection, fIPV1 and fIPV2: Upper right arm, fIPV3: Upper left arm

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Both Oral Polio Vaccine (OPV) and Inactivated Polio Vaccine (IPV) vaccines are generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- **Oral Polio Vaccine (OPV):** Common reactions are mild and self-resolving such as vomiting
- **Inactivated Polio Vaccine (IPV):** Common reactions are mild and self-resolving such as local redness, pain, fever, loss of appetite, diarrhoea, vomiting.

  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.

- Serious reactions to vaccine are rare which include severe allergic reaction (anaphylaxis), hypersensitivity reaction; Vaccine-Associated Paralytic Poliomyelitis (VAPP) which is an adverse event following exposure to OPV especially in immunocompromised children.

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Pentavalent Vaccine

Introduction

The Pentavalent vaccine is a combination vaccine that protects the child against five serious childhood diseases: Diphtheria, Pertussis (whooping cough), Tetanus, Hepatitis B, and *Haemophilus influenzae* type b (Hib). These diseases can cause life-threatening complications including pneumonia, meningitis, liver failure, and severe breathing difficulties, particularly in children under five years of age.

When to get vaccinated?

- Three doses of Pentavalent vaccine, are recommended to children at:
    - **6 weeks (1.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Rotavirus vaccine (RVV), Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).
    - **10 weeks (2.5 months**) along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Rotavirus vaccine (RVV),
    - **14 weeks (3.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Rotavirus vaccine (RVV), Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).
- Pentavalent vaccine can be given till one year of age.
- If the child has already received one or two doses of Pentavalent before 1 year of age, the next doses can be given with a gap of 4 weeks (28 days) between the doses.
- If the child has not received any dose of Pentavalent vaccine before one year of age, she/he can get three doses of Diphtheria, Pertussis & Tetanus (DPT) vaccine at an interval of 1 month each and one booster dose of DPT vaccine after 6 months of getting third dose of DPT.

Who should not get vaccinated?

- Children with a history of severe allergic reaction to a previous dose of Pentavalent vaccine.
- Children with moderate or severe illness should postpone vaccination until recovery.

What is the route and site of administration of this vaccine?

- Intramuscular injection, left mid-thigh

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Pentavalent vaccine is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as fever, pain/swelling at injection site, irritability, drowsiness, inconsolable crying.

  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.
- Serious reactions to vaccine are rare which include seizures, hypotonic hyporesponsive episode (HHE) which is characterized by decreased muscle

tone, decreased responsiveness and a change in skin color, severe allergic reaction (anaphylaxis), encephalopathy.

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Rotavirus Vaccine

Introduction

Rotavirus is the leading cause of severe diarrhea and dehydration in children under the age of five worldwide.

Rotavirus vaccine (RVV) is a safe, effective and oral vaccine, which prevents gastroenteritis (stomach infection) due to rotavirus infection.

When to get vaccinated?

- Three doses of Rotavirus vaccine are recommended to children at the:
    - **6 weeks (1.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).
    - **10 weeks (2.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine.
    - **14 weeks (3.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Pneumococcal Conjugate Vaccine (PCV), and Inactivated Polio Vaccine (IPV).
- Rotavirus vaccine can be given till one year of age.
- Do not give Rotavirus vaccine (RVV) if the child has not received a single dose before one year of age.
- If the child has already received one or two doses of Rotavirus vaccine (RVV) before 1 year of age, the next doses can be given with a gap of 4 weeks (28 days) between the doses. However, the next doses cannot be given after 24 months of age.

Who should not get vaccinated?

Infants with

- Known severe allergic reaction to a previous dose of Rotavirus vaccine.
- History of intussusception (bowel obstruction): Intussusception is when one segment of the bowel becomes enfolded within another segment. Intussusception occurs in infants and children even without having taken the

Rotavirus vaccine. It has been reported as a rare adverse event following Rotavirus vaccine. It causes severe, cramping abdominal pain that comes and goes in children, abdominal surgery, and intestinal malformation.

- Severe combined immunodeficiency (SCID) or severe immunodeficiency.
- Moderate to severe acute illness (including diarrhoea) — postpone the vaccine dose till recovery.

What is the route of administration of this vaccine?

- Oral drops

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Rotavirus vaccine is generally safe but your child may experience mild side effects such as irritability, fever, mild diarrhea or vomiting following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Mild reactions such as fever can be managed with simple steps by giving syrup paracetamol (dose as advised by vaccinator), oral fluids, and removing layers of clothing. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during, and after vaccination for relieving any discomfort and crying. Other methods like, skin-to-skin contact and holding the baby are also helpful in reducing, fever, and crying after vaccination.
- Serious reactions to vaccine are rare which include intussusception (bowel obstruction)

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Pneumococcal Conjugate Vaccine (PCV)

Introduction

Pneumococcal disease is a major cause of morbidity and mortality in children under five years of age in India. It is caused by *Streptococcus pneumoniae*, a bacterium responsible for severe infections such as pneumonia, meningitis, and sepsis. These diseases can be life-threatening, especially in infants and young children.

Pneumococcal Conjugate Vaccine (PCV) is safe and highly effective in reducing the incidence of invasive pneumococcal disease, including pneumonia and meningitis. Vaccinating children not only protects them but also contributes to herd immunity, reducing transmission within the community.

When to get vaccinated?

- Two primary doses and one booster dose of Pneumococcal Conjugate Vaccine (PCV) are recommended to children at the age of:
    - **6 weeks (1.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Rotavirus vaccine (RVV), and Inactivated Polio Vaccine (IPV)
    - **14 weeks (3.5 months)** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Pentavalent vaccine, Rotavirus vaccine (RVV), and Inactivated Polio Vaccine (IPV)
    - **9 to 11 months** along with other co-administered vaccines namely Measles-Rubella (MR) vaccine, Inactivated Polio Vaccine (IPV), and Japanese Encephalitis vaccine (JE-in selected districts only).
- PCV can be given till one year of age.
- Do not give Pneumococcal Conjugate Vaccine (PCV) if the child has not received a single dose before one year of age.
- If the child has already received one or two doses of Pneumococcal Conjugate Vaccine (PCV) before 1 year of age, the next doses can be given with a gap of 2 months (8 weeks) between the doses.

Who should not get vaccinated?

- Children with a history of severe allergic reaction to a previous Pneumococcal Conjugate Vaccine (PCV) dose or any vaccine component or diphtheria toxoid vaccine such as Pentavalent vaccine.
- Children with moderate or severe illness should postpone vaccination until recovery.

What is the route and site of administration of this vaccine?

- Intramuscular injection, right mid-thigh

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Pneumococcal Conjugate Vaccine (PCV) is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as fever; injection site redness, swelling, pain/tenderness, irritability and reduced appetite.

  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during, and after vaccination, for relieving pain and crying. Other methods like sponging,

skin-to-skin contact, and holding the baby are also helpful in reducing pain, fever, and crying after vaccination.

- Serious reactions to vaccine are rare, which include febrile seizures, severe allergic reaction (anaphylaxis), hypotonic hyporesponsive episode (HHE).

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Measles Rubella (MR) Vaccine

Introduction

Measles is a highly infectious disease and causes a lot of childhood morbidity and mortality among children less than five years of age. Measles infection can cause serious complications, including blindness, encephalitis, severe diarrhoea and dehydration, ear infections, or severe respiratory infections such as pneumonia which may lead to death.

Rubella (German measles) infection, although mild, can lead to foetal death, spontaneous abortion and a set of serious birth defects known as congenital rubella syndrome (CRS) when an unimmunized woman is infected during early pregnancy, resulting in a huge health burden to the family and society.

Although there is no specific treatment for both measles and rubella, these diseases can be prevented by administering Measles Rubella (MR) vaccines. MR vaccines are highly efficacious and safe.

When to get vaccinated?

- Two doses of Measles Rubella (MR) vaccine are recommended at the age of:
    - **9 to 11 months** along with other co-administered vaccines namely Inactivated Polio Vaccine (IPV), Pneumococcal Conjugate Vaccine (PCV), and Japanese Encephalitis vaccine (JE-in selected districts only).
    - **16 to 23 months** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Diphtheria, Pertussis & Tetanus (DPT) vaccine and Japanese Encephalitis vaccine (JE-in selected districts only).
- In routine, Measles Rubella (MR) vaccine can be given up to 5 years of age.

Who should not get vaccinated?

- Children with a history of severe allergic reaction to a previous dose of Measles Rubella vaccine or an ingredient in the vaccine.

- Children with known or suspected immunodeficiency (e.g., HIV with AIDS symptoms).
- Pregnancy
- Children with moderate or severe illness should postpone vaccination until recovery.
- Consult medical doctor to determine the appropriate timing for MR vaccination for children who have received recent blood transfusions or have low platelets due to another illness.

What is the route and site of administration of this vaccine?

- Subcutaneous injection, right upper-arm

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Measles Rubella (MR) vaccine is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as local redness/swelling at injection site; irritability, malaise, anorexia; fever, rash and conjunctivitis (usually after a week of vaccination).

  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and

after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.

- Serious reactions to vaccine are rare which include severe allergic reaction (anaphylaxis), febrile seizures, and thrombocytopenia (low platelet counts).

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Japanese Encephalitis (JE)

Introduction

Japanese Encephalitis (JE) is a viral infection transmitted by mosquitoes and is a leading cause of viral encephalitis in Asia, including India. It primarily affects children and can lead to severe complications such as brain inflammation, paralysis, seizures, and even death.

Japanese Encephalitis (JE) vaccine is a safe and effective tool in preventing infection from JE virus and its complications.

Currently under Universal Immunization Programme (UIP), JE vaccine is provided in only high-risk endemic districts of selected States/UTs.

When to get vaccinated against JE?

- Two doses of Japanese Encephalitis (JE) vaccine are recommended at the age of:
    - **9 to 11 months** along with other co-administered vaccines namely Measles Rubella (MR) vaccine, Inactivated Polio Vaccine (IPV), and Pneumococcal Conjugate Vaccine (PCV).
    - **16 to 23 months** along with other co-administered vaccines namely Oral Polio Vaccine (OPV), Measles Rubella (MR) vaccine and Diphtheria, Pertussis & Tetanus (DPT) vaccine
- Japanese Encephalitis (JE) vaccine can be given up to 5 years of age.

Who should not get vaccinated?

- Children with a history of severe allergic reaction to a previous dose of Japanese Encephalitis (JE) vaccine or an ingredient in the vaccine.
- Children with moderate or severe illness should postpone vaccination until recovery.

What is the route and site of administration of this vaccine?

- Intramuscular injection, left mid-thigh

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme in only high-risk endemic districts of selected States/UTs.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Japanese Encephalitis (JE) vaccine is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as local reactions at the injection site including pain, redness, induration, swelling and tenderness; fever, irritability or drowsiness, headache, allergic reactions.

  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during, and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact, and holding the baby are also helpful in reducing pain, fever, and crying after vaccination.
- Serious reactions to vaccine are rare, which include severe allergic reaction (anaphylaxis), seizures.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is

trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – Td Vaccine

Introduction

Tetanus and Diphtheria are serious and potentially fatal bacterial infections. The bacteria releases toxins which lead to painful muscle stiffness and spasms (in case of *Clostridium tetani* which causes Tetanus), and blocks the airway, damages the heart (in case of *Corynebacterium diphtheriae* which causes Diphtheria). If untreated, the infections can be fatal.

Td vaccine is safe and effective in protecting against Tetanus and Diphtheria. Both are toxoid vaccines (act by destroying the toxin produced by the bacteria). Administering Td during adolescence and pregnancy boosts long-term immunity and protects newborns through maternal antibodies.

When to get vaccinated?

- **Adolescents:** Two doses of Td vaccine are recommended for adolescents at:
  - **10 years of age**
  - **16 years of age**
- **Pregnant Women:**
  - 1st dose of Td vaccine (Td-1) as early as possible during First Antenatal visit.
  - 2nd dose of Td vaccine (Td-2) after 4 weeks of first dose of Td vaccine (Td-1).
  - A single Booster dose of Td vaccine (Td-B) is administered if the woman has received two Td doses during her previous pregnancy within last 3 years.
  - The vaccine can be administered 4 weeks before Expected Date of Delivery (EDD) if not received, any time before the delivery.

Who should not get vaccinated?

- Individuals with a history of severe allergic reaction to a previous dose of Td vaccine or an ingredient in the vaccine.

- Postpone vaccination in case of moderate to severe acute illness until recovery.

What is the route and site of administration of this vaccine?

- Intramuscular injection, upper arm

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme in only high-risk endemic districts of selected States/UTs.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- Td vaccine is generally safe, but individuals may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as Pain, redness or swelling at the injection site; mild fever; fatigue, headache, malaise, and muscle aches. Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), or a cool compress on the injection site.
- Serious reactions to vaccine are rare which include severe allergic reaction (anaphylaxis), brachial neuritis which is a rare condition affecting the nerves of the brachial plexus, which are located in the shoulder and arm. It's characterized by the sudden onset of severe pain in the shoulder and arm, followed by muscle weakness and potential sensory changes

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately. **In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.**

Vaccine Profile – HPV Vaccine

Introduction

Human Papilloma Virus (HPV) is a virus that can cause cancers and genital warts. The HPV vaccine reduces the chances of being infected with human papillomavirus (HPV). Most types of HPV are harmless. However, some types are linked to an increased risk of certain types of cancer, including cervical cancer, vulval cancer, vaginal cancer, anal cancer, penile cancer & oropharynx cancer.

HPV vaccination provides safe, effective, and lasting protection against the certain types of HPV infections. The vaccine is most effective when given before a person is exposed to the virus.

When to get vaccinated?

- Under the National HPV vaccination initiative, HPV vaccine is provided as a single-dose to girls aged 14 years (those who have celebrated their 14th birthday but have not yet celebrated their 15th birthday).

Who should not get vaccinated?

- A girl with moderate or severe illness should wait until she is recovered.
- Those who had an allergic reaction to previous vaccination or are known to be allergic to yeast should avoid getting vaccinated.
- Pregnancy
- Girls out of the target age group range under the current HPV vaccination initiative.
- Previously vaccinated. If you have already received the HPV vaccine, you may update the vaccination status in U-WIN.

What is the route of administration of this vaccine?

- Intramuscular injection, left upper-arm

Where is this vaccine being provided?

- Eligible girls can get vaccinated against HPV at any government health facility which provides HPV vaccination services.

- You can self-register your daughter on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the HPV vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

HPV vaccine is generally safe but your daughter may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.

Common reactions are mild and self-resolving such as:

- Local pain, redness, or swelling at the site of injection
- Fever, headache, feeling tired, nausea
- Dizziness or fainting after vaccination (due to fear of injection or being on empty stomach; not related to the HPV vaccine; more common in adolescents).

Mild reactions can be managed with simple steps, such as giving paracetamol, extra fluids, removing layers of clothing or a cool compress on the injection site.

To prevent fainting and injuries from fainting, beneficiaries should remain seated for at least 15 minutes post vaccination. A few may need to be vaccinated in lying-down position and should remain in lying down position for at least 15 minutes following vaccination.

Serious reactions to vaccine such as a severe allergic reaction (anaphylaxis) are very rare and can occur within 15 minutes to 30 min post vaccination.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.

Vaccine Profile – DPT Vaccine

Introduction

The Diphtheria, Pertussis (whooping cough), and Tetanus (DPT) vaccine protects against three life-threatening diseases: Diphtheria (respiratory infection), Pertussis (whooping cough), and Tetanus (muscle spasms). These diseases cause significant morbidity and mortality in India. Vaccination prevents severe complications like suffocation (diphtheria), pneumonia (pertussis), and fatal lockjaw (tetanus).

When to get vaccinated?

- Five doses of DPT vaccine are recommended at:
    - **6 weeks (1.5 months), 10 weeks (2.5 months), and 14 weeks (3.5 months)** as part of Pentavalent vaccine.
    - **16-23 months** as first booster dose of DPT along with other co-administered vaccines namely Oral Polio Vaccine, Measles-Rubella Vaccine and Japanese Encephalitis vaccine (JE-in selected districts only).
    - **5-6 years** as second booster dose of DPT.
    - If child has not received pentavalent vaccine till one year of age, the child should be administered with three doses of DPT at 4 weeks interval. The booster dose will be given at a minimum interval of 6 months after administering third dose of DPT.

. Who shouldn't get vaccinated?

- Children with a history of severe allergic reaction to a previous dose of DPT containing vaccine.
- Children with moderate or severe illness should postpone vaccination until recovery.

What is the route and site of administration of this vaccine?

- Intramuscular injection, left mid-thigh

Where is this vaccine being provided?

- At Outreach and Fixed sessions sites under Universal Immunization Programme.
- You can self-register your child on U-WIN digital platform, locate the nearby vaccination sessions and schedule an appointment for the age-appropriate vaccination as per your choice. You can also walk in directly and get on-site registration for vaccination using the digital U-WIN platform.

What are the possible side effects?

- DPT vaccine is generally safe but your child may experience mild side effects following vaccination. Most side effects last no more than a couple of days and are part of the immune system's natural response to the vaccine.
- Common reactions are mild and self-resolving such as fever, pain/swelling at injection site, irritability, drowsiness, inconsolable crying.
  Mild reactions can be managed with simple steps, such as giving paracetamol (dose as advised by vaccinator), oral fluids, removing layers of clothing or a cool compress on the injection site. Caregivers are encouraged to practice home remedies (non-pharmacological methods) like breastfeeding before, during and after vaccination for relieving pain and crying. Other methods like sponging, skin-to-skin contact and holding the baby are also helpful in reducing pain, fever and crying after vaccination.
- Serious reactions to vaccine are rare which include seizures, hypotonic hyporesponsive episode (HHE), severe allergic reaction (anaphylaxis), and encephalopathy.

If your child has a reaction that you think is severe or unexpected, seek medical advice immediately from the nearest health facility.

What is the post-vaccination care?

Wait for at least 30 minutes post vaccination. The person who is vaccinating is trained to deal with allergic reactions and treat them immediately.

In case of additional information, doubts, concerns, or medical assistance after vaccination, please go to the nearest government health facility or contact your area ANM/ASHA.