

# 2017 Binational Immunization Resource Tool for Children from Birth Through 18 Years

Vaccine doses administered in Mexico may be counted as valid in the United States (including vaccines not licensed for use in the U.S.) if the dose or doses are documented in writing (including the date of administration) and comply with the minimum intervals and minimum ages as recommended by the Advisory Committee on Immunization Practices.

See [www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html](http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html).

## MEXICO

### Vaccines for Infants and Adolescents

## USA

DOSES RECOMMENDED BY AGE		DISEASES	DOSES RECOMMENDED BY AGE		
	Antihepatitis B at birth, 2, 6 months <sup>1</sup>	<b>Hepatitis B</b>	HepB birth, 2, 6 through 18 months		Pediarix 2, 4, 6 months
		<b>Meningococcal</b> (Private sector only in Mexico)	MenACWY 2 months through 10 years (high-risk) 11 through 12 years, 16 years	MenB 10 through 18 years (high risk) 16 through 18 years (subject to individual clinical decision making)	MenHibrix 2, 4, 6, and 12 through 15 months (high-risk)
		<b>H. influenzae type b</b>	Hib 2, 4, 6 <sup>5</sup> , 12 through 15 months		
Td 10-18 years	DPT 4 through 6 years	Pentavalente Acelular <sup>§</sup> 2, 4, 6, 18 months	Tosferina / Pertussis	DTaP 2, 4, 6, 15 through 18 months, 4 through 6 years	Tdap 11 through 12 years (required in many states for 7th grade entry)**
			Difteria / Diphtheria		
			Tétanos / Tetanus		
	Sabin (OPV) 2 doses per year <sup>3</sup> , from 6 to 59 months of age (administered during National Health Weeks)	<b>Poliomielitis / Polio</b>	IPV 2, 4, 6 through 18 months, 4 through 6 years		Pediarix 2, 4, 6 months
		<b>Rotavirus</b>	RotaTeq 2, 4, 6 months or Rotarix 2, 4 months		
		<b>Neumococo / Pneumococcal</b>	PCV13 2, 4, 6, 12 through 15 months, 16 months through 18 years (high risk)	PPSV23 2 through 18 years (high risk)	
		<b>Influenza</b>	Influenza* (yearly) 6 months or older		
SR 10 years	Triple Viral SRP 12 months, 6 years	Sarampión / Measles	MMR 12 through 15 months, 4 through 6 years	MMRV 12 through 15 months, 4 through 6 years	
		Rubéola / Rubella			
		Parotiditis / Mumps			
	Varicela 12 months, 4-6 years <sup>2</sup>	<b>Varicela / Varicella</b>	Varicella 12 through 15 months, 4 through 6 years		
	Antihepatitis A 12 months <sup>2</sup>	<b>Hepatitis A</b>	HepA 12, 18 months		
	HPV 9 through 12 years (2 doses) (girls only)	<b>Virus del Papiloma Humano / Human Papillomavirus</b>	HPV 11 through 12 years (can start at 9) 2 or 3 doses		
	BCG at birth	<b>Tuberculosis</b> (Not offered in the U.S.)			

#### Vacunas Combinadas/ Vaccination Combinations

Triple Viral SRP = MMR

<sup>§</sup>Pentavalente Acelular = DTaP+ IPV+ Hib (August 2007 to present)

Pentavalente = DPT + Hib + HepB (Prior to July 2007)

#### FOOTNOTES

<sup>1</sup> For those who have not had the full series by age 11 years, give two doses 1 month apart at 11 years

<sup>2</sup> Offered to high-risk groups only

<sup>3</sup> Administered after at least 2 doses of IPV (Pentavalente)

<sup>4</sup> Two doses given at least four weeks apart are recommended for children who are getting a flu vaccine for the first time and then 1 dose per year.

#### Vaccination Combinations

Pediarix = DTaP-HepB-IPV

MenHibrix = Hib-MenCY

ProQuad = MMRV

Pentacel = DTaP-IPV/Hib

Kinrix or Quadacel = DTaP-IPV

#### FOOTNOTES

\* Two doses given at least four weeks apart are recommended for some children aged 6 months through 8 years of age who are getting a flu vaccine for the first time. See Influenza recommendations for details: [www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html](http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html).

\*\* For a listing of Tdap requirements for secondary schools, visit <http://www.immunize.org/laws/tdap.asp>. Some children who were lapsed may have received a dose of Tdap at ages 7 through 10 years.

<sup>5</sup> Depending on which Hib vaccine is used, a child may not need the dose at 6 months of age.

# Binational Tool Protocol

1. Determine what immunizations are needed for the child based on his or her age and the United States' Recommended Immunization Schedule ([www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html](http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html)).

2. Review the child's Mexican immunization record, which is part of the National Health Card (Cartilla Nacional de Salud). There are two versions of the Health Cards. One is for children from birth through age 9, and the other is for 10 through 19. These are the official documents used throughout Mexico to record immunization and other health information. The vaccine records are located on pages 10-11 of the Health Cards for the children from birth through 9 years and on pages 7-8 for the pre-teens and teens (ages 10-19).

The table below provides translations of terms that may be found on the Health Cards and the immunization records sections of those cards.

English	Spanish
January	Enero
February	Febrero
March	Marzo
April	Abril
May	Mayo
June	Junio
July	Julio
August	Agosto
September	Septiembre
October	Octubre
November	Noviembre
December	Diciembre
Month(s)	Mes(es)
Years(s)	Año(s)
At birth	Al nacer
Next	Próxima

### Demographic Information

The first section on the inside of this document contains demographic information.

- Name Section includes a "primer y segundo apellido (first and second last name)" or paternal and maternal last names, respectively.
- Dates in Mexico are written Day/Month/Year (día/mes/año). For instance, 20/1/2008 is Jan 20, 2008.

### Basic Immunization Schedule

The second part of the document contains information on the basic childhood immunization schedule, outlined in 5 columns:

- VACUNA (Vaccine)
  - ENFERMEDAD QUE PREVIENE (Preventable Disease)
  - DOSIS (Dose)
  - EDAD Y FRECUENCIA (Age & Frequency)
  - FECHA DE VACUNACIÓN (Date of Vaccine Administration)
- Dates of vaccine administration are recorded in pen.
  - Next due date is always recorded in pencil.
  - Clinic stamp or signature of person administering

### Private Sector Vaccines

Vaccines administered in the private sector are recorded in the gray section: OTRAS VACUNAS (other vaccines)

CURP:

No. de Certificado de Nacimiento

FOTOGRAFÍA

IDENTIFICACIÓN: GPO SANGUÍNEO Y RH:

APELLIDOS Y NOMBRE: Robles Ramos María

AFILIACIÓN / MATRÍCULA / EXPEDIENTE:

UNIDAD MEDICA:

CONSULTORIO NO.

DOMICILIO:

CALLE Y NÚMERO

COLONIA / LOCALIDAD

MUNICIPIO O DELEGACIÓN

C.P.

ENTIDAD FEDERATIVA

LUGAR Y FECHA DE NACIMIENTO:

LOCALIDAD

MUNICIPIO O DELEGACIÓN / ENTIDAD FEDERATIVA

LUGAR Y FECHA DE REGISTRO CIVIL:

MUNICIPIO O DELEGACIÓN / ENTIDAD FEDERATIVA

### ESQUEMA DE VACUNACIÓN

VACUNA	ENFERMEDAD QUE PREVIENE	DOSIS	EDAD Y FRECUENCIA	FECHA DE VACUNACIÓN
NEUMOCÓCICA CONJUGADA	INFECCIONES POR NEUMOCOCO	PRIMERA	2 MESES	
		SEGUNDA	4 MESES	
		REFUERZO	12 MESES	
INFLUENZA	INFLUENZA	PRIMERA	6 MESES	
		SEGUNDA	7 MESES	
		REVACUNACIÓN	ANUAL HASTA LOS 59 MESES	
SRP	SARAMPIÓN, RUBÉOLA Y PAROTIDITIS	ADICIONALES	1 AÑO	
		ADICIONALES	6 AÑOS	
SABIN	POLIOMIELITIS	ADICIONALES		
SR	SARAMPIÓN Y RUBÉOLA	ADICIONALES		
OTRAS VACUNAS				

- Match Mexican records with left side of guide (Mexico Doses Recommended by Age).
- Review any immunization records obtained in the United States.
- Match the U.S. records with right side of guide (USA Doses Recommended by Age).
- Check insets, as they contain important information about combination vaccines. For example, in Mexico, Pentavalente Acelular is a combination vaccine, which includes DTaP, IPV, and Hib.
- If a given vaccination recommendation for particular vaccine preventable disease is fulfilled for EITHER side of the vaccination chart, the child/adolescent can be considered vaccinated against that disease.
- Check for contraindications, provide Vaccine Information Statement (VIS), and discuss any questions with the parent. Then, administer any vaccinations that are due or need to be caught up.
- Document in official chart and patient's personal medical record any vaccinations that are given.
- Encourage patient to obtain available medical records from all clinicians and healthcare providers in the future and continue to document vaccinations received. Patient should be encouraged to take these records to any subsequent healthcare visits.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention