

National Childhood Immunisation Schedule (NCIS)

(from birth to age 17 years)

Vaccine	Birth	2 months	4 months	6 months	12 months	15 months	18 months	2-4 years	5-9 years	10-11 years	12-13 years	13-14 years	15-17 years
Bacillus Calmette-Guérin (BCG)	D1												
Hepatitis B (HepB)	D1	D2		D3									
Diphtheria, tetanus and acellular pertussis (paediatric) (DTaP)		D1	D2	D3			B1						
Tetanus, reduced diphtheria and acellular pertussis (Tdap)										B2			
Inactivated poliovirus (IPV)		D1	D2	D3			B1			B2			
<i>Haemophilus influenzae</i> type b (Hib)		D1	D2	D3			B1						
Pneumococcal conjugate (PCV13)			D1	D2	B1								
Pneumococcal polysaccharide (PPSV23)								One or two doses for children and adolescents age 2-17 years with specific medical condition or indication.					
Measles, mumps and rubella (MMR)					D1	D2							
Varicella (VAR)					D1	D2							
Human papillomavirus (HPV2)											D1 (Females)	D2 (Females)	
Influenza (INF)				Annual vaccination or per season for <u>all children</u> age 6 months to <5 years (6-59 months).					Annual vaccination or per season for children and adolescents age 5-17 years with specific medical condition or indication.				
COVID-19				Two initial doses (three doses for immunocompromised), followed by annual vaccination for children age 6 months to <5 years with specific medical condition or indication.					One initial dose (three doses for immunocompromised), followed by annual vaccination for children and adolescents age 5-17 years with specific medical condition or indication.				



Recommended ages and doses for all children



Recommended for persons with specific medical condition or indication

FOOTNOTES:

- **D1, D2, D3:** Dose 1, dose 2, dose 3
- **B1, B2:** Booster 1, booster 2
- **10-11, 12-13, 13-14 years:** Primary 5, Secondary 1, Secondary 2 (Tdap, IPV, HPV (for females) and MMR (as catch-up) vaccines are provided as part of Health Promotion Board's school-based vaccination programme)
- **HepB:** Doses 2 and 3 are recommended to be given as part of the 6-in-1 vaccine at 2 and 6 months, respectively
- **MMR:** Only the dose 2 is recommended to be given as part of the MMRV vaccine

Updated 12 October 2026

Details of the vaccinations recommended under the NCIS

Note: Individuals or caregivers should consult a doctor for vaccination advice specific to the individual's age and medical condition(s), as well as eligibility for subsidised vaccination.

RECOMMENDED VACCINE TYPES, DOSES AND GROUPS IN THE NCIS		
Vaccine	Recommendations	Additional information
HepB	Recommended vaccine types and doses • Dose 1: Monovalent HepB (birth dose, within 24 hours) • Dose 2: 6-in-1 vaccine at 2 months • Dose 3: 6-in-1 vaccine at 6 months	Infants born to HBsAg +ve mothers • Dose 1: Monovalent HepB (and HepB immunoglobulin (HBIG) as a birth dose within 12 hours or ASAP) • Dose 2: Monovalent HepB at 1 month • (5-in-1 vaccine recommended at 2 months) • Dose 3: 6-in-1 vaccine at 6 months
5-in-1 (DTaP-IPV-Hib) 6-in-1 (DTaP-IPV-Hib-HepB) Tdap	Recommended vaccine types and doses • Dose 1: 6-in-1 vaccine at 2 months • Dose 2: 5-in-1 vaccine at 4 months • Dose 3: 6-in-1 vaccine at 6 months • Dose 4: 5-in-1 vaccine at 18 months (booster 1) • Dose 5: Tdap-IPV at 10-11 years (booster 2)	• Tdap can be used instead of Tdap-IPV if IPV is not indicated
Inactivated poliovirus (IPV)	Recommended vaccine types and doses • Dose 1, 2, 3, 4: 5-in-1 or 6-in-1 vaccines (as per schedule for DTaP-containing vaccines) • Dose 5: Tdap-IPV (booster 2)	• IPV can be used instead of Tdap-IPV if Tdap is not indicated
Pneumococcal conjugate (PCV13)	• PCV13 is recommended for all children age <5 years and persons age 2-17 years who are at increased risk of developing severe pneumococcal disease. Children who did not receive PCV as per routine schedule are recommended to receive age- or indication-appropriate doses.	High-risk groups recommended for PCV13 Persons age 2-17 years with • Cochlear implant or cerebrospinal fluid leak • Anatomic or functional asplenia (including conditions such as homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction) • Immunosuppression (including immunosuppression caused by medications, HIV or other immunodeficiencies)

RECOMMENDED VACCINE TYPES, DOSES AND GROUPS IN THE NCIS		
Vaccine	Recommendations	Additional information
Pneumococcal polysaccharide (PPSV23)	• PPSV23 is recommended for persons age 2-17 years at increased risk of developing severe pneumococcal disease. • One or two doses are recommended depending on high-risk condition. • If both PCV13 and PPSV23 are indicated, PCV13 should be given first, and PPSV23 administered at the appropriate interval later.	High-risk groups recommended for PPSV23 Persons age 2-17 years with • Chronic pulmonary, cardiovascular, renal or liver disease, or diabetes mellitus • Cochlear implant or cerebrospinal fluid leak • Anatomic or functional asplenia (including conditions such as homozygous sickle cell disease and coeliac syndrome that may lead to splenic dysfunction) • Immunosuppression (including immunosuppression caused by medications, HIV or other immunodeficiencies)
MMR and Varicella (VAR)	Recommended vaccine types and doses Dose 1: Separate MMR and VAR at 12 months Dose 2: Combined MMRV at 15 months Catch-up MMR • 2-dose series at least 4 weeks apart Catch-up Varicella Age <13 years • 2-dose series 3 months apart Age 13-17 years • 2-dose series 4-8 weeks apart	Vaccine type: • Separate MMR and VAR are recommended for dose 1. The use of MMRV as dose 1 in children age 12-47 months is associated with higher risk of febrile seizures, compared with separate MMR and VAR. • If MMRV is preferred for dose 1 in children age 12-47 months, appropriate clinical advice should be given to the parent and consent obtained. • MMRV is recommended as a catch-up for dose 1 in children age 48 months to 12 years and dose 2 at any age (i.e. 15 months to 12 years). • The maximum age for MMRV is 12 years. Separate MMR and/or VAR may be used as indicated for persons age 13-17 years.
HPV2	Recommended doses for school-based programme 2-dose series for secondary school female students • Dose 1: HPV2 at 12-13 years (Secondary 1) • Dose 2: HPV2 at 13-14 years (Secondary 2)	Recommended doses for settings outside of school-based programme Females age 9 -14 years • 2-dose series at 0, 6 months Females age 15 -17 years • 3-dose series at 0, 1, 6 months

RECOMMENDED VACCINE TYPES, DOSES AND GROUPS IN THE NCIS		
Vaccine	Recommendations	Additional information
Influenza (INF)	- Seasonal influenza vaccine is recommended for persons age 6 months to 17 years who are at increased risk of influenza-related complication. - Vaccination is recommended annually or per season, depending on the prevailing recommendations for that year. Recommended doses Age 6 months to 8 years 2-dose series 4 weeks apart for children receiving influenza vaccination for the first time 1 dose for all other children* Age 9-17 years 1 dose* <i>* Annually or per season as recommended</i>	High-risk groups recommended for seasonal influenza vaccine Children age 6 months to <5 years (6-59 months) - Recommended for all children in this age range Persons age 5-17 years - who have chronic disorders of the pulmonary or cardiovascular systems, including asthma - who have required medical follow-up or hospitalisation due to chronic metabolic diseases (including diabetes mellitus), renal, neurologic, hepatic, or haematologic disorders, or immunosuppression (including immunosuppression caused by medications, HIV or other immunodeficiencies) - who are receiving long term aspirin therapy and therefore might be at risk for developing Reye syndrome after influenza infection
COVID-19	- COVID-19 vaccine is recommended for persons age 6 months to 17 years who are at increased risk of developing severe COVID-19 disease. Recommended doses and interval Age 6 month to 4 years 2-dose series 8 weeks apart for children receiving COVID-19 vaccination for the first time; followed by 1 dose at around one year (and at least 5 months) from the last vaccine dose Age 5-17 years 1 dose for children receiving COVID-19 vaccination for the first time; followed by 1 dose at around one year (and at least 5 months) from the last vaccine dose Three initial doses for immunocompromised - Individuals with moderate to severe immunocompromised conditions are recommended to receive a total of three doses of the mRNA vaccines for their initial doses. <i>Recommended interval between doses</i> - Dose 2: eight weeks after first dose	High-risk groups recommended for COVID-19 vaccine Persons age 6 months to 17 years with - Diabetes, heart conditions (such as heart failure, ischaemic heart disease, cardiomyopathy), chronic lung (including asthma), liver (including cirrhosis), neurologic (including stroke) conditions and kidney conditions at any stage (including dialysis) - Cancer on active treatment, blood conditions (such as thalassaemia and sickle cell anaemia), genetic or metabolic conditions (including Down's syndrome and cystic fibrosis), obesity (BMI ≥ 30) - Immunodeficiencies (including HIV infection), persons on non-cancer immunosuppressive treatment Immunocompromised groups recommended for three initial doses Persons age 6 months to 17 years with - Transplant patients on immunosuppressive therapy, including solid organ and allogeneic stem cell transplants - Cancer patients on active treatment with chemotherapy and immunosuppressive therapy, haematological cancers

RECOMMENDED VACCINE TYPES, DOSES AND GROUPS IN THE NCIS		
Vaccine	Recommendations	Additional information
	Dose 3: eight weeks after second dose	- Immunosuppressive treatment for non-cancer conditions, advanced or untreated HIV - End-stage kidney disease