

Td/Tdap
Tetanus, Diphtheria & Tetanus. Diphtheria and Pertussis

<p>Pathophysiology</p>	<p>Diphtheria: Bacteria Respiratory transmission Incubation 2-5 days</p> <p>Tetanus: Bacteria Enters the body through a wound Incubation 3-21 days</p> <p>Pertussis: Bacteria Respiratory transmission Incubation 5-10 days</p>								
<p>Vaccine Description</p>	<ul style="list-style-type: none"> • Inactivated polysaccharide vaccine, containing diphtheria toxoid, tetanus toxoid & acellular pertussis • Two diphtheria, tetanus and acellular pertussis vaccines (Tdap) are licensed: <ul style="list-style-type: none"> ○ Boostrix™ for administration to persons 10 years of age and older ○ Adacel™ for administration to persons 10-64 years of age 								
<p>Dose & Route</p>	<p>0.5 mL given IM</p>								
<p>Administration Schedule</p> <p>Tdap can be administered regardless of interval since the last tetanus or diphtheria-toxoid containing vaccine.</p> <p>*Fully vaccinated is defined as 5 doses of DTaP or 4 doses of DTaP if the fourth dose was administered on or after the fourth birthday and at least 6 months after the 3rd dose.</p>	<p><i>Administration schedule for Td/ Tdap booster doses following a primary DTaP/Td series:*</i></p> <ul style="list-style-type: none"> • Adolescents 11-12 years: 1 dose Tdap <p>Catch-up vaccination</p> <ul style="list-style-type: none"> • Adolescents age 13-18 years who have not received Tdap: 1 dose Tdap, then Td or Tdap booster every 10 years • Persons age 7-18 years not fully vaccinated with DTaP: 1 dose Tdap as part of catch-up series (preferably the first dose); if additional doses are needed, use Td or Tdap • Children age 7-9 years who receive Tdap inadvertently or as part of the catch-up series should receive the routine Tdap dose at 11-12 years • Children age 10 years who receive Tdap do not need the routine Tdap dose at age 11-12 years • DTaP inadvertently given after the 7th birthday: Child age 7-9 years: DTaP may count as part of catch-up series; routine Tdap dose at 11-12 should be administered. Children age 10-18 years: count dose of DTaP as the adolescent Tdap booster <table border="0"> <thead> <tr> <th style="text-align: left;">Dose</th> <th style="text-align: left;">Minimal Dose Intervals</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>0</td> </tr> <tr> <td>2</td> <td>4 weeks after dose #1</td> </tr> <tr> <td>3</td> <td>6 months after dose #2</td> </tr> </tbody> </table>	Dose	Minimal Dose Intervals	1	0	2	4 weeks after dose #1	3	6 months after dose #2
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<p>Adults aged 19 and older</p>	<p>Administration Schedule for Td/ Tdap booster doses following a primary DTaP/Td series:*</p> <ul style="list-style-type: none"> • Td or Tdap should be given every 10 years following a dose of Tdap or for tetanus prophylaxis in wound management • Adults 19-64 years of age, especially those who have close contact with infants < 1 year of age, should receive a single dose of Tdap to replace a single dose of Td as a booster immunization if they have not already received Tdap. • Adults 65 years and older who have or anticipate having close contact with an infant aged less than 12 months should receive a single dose of Tdap. • Other adults 65 years and older may be given a single dose of Tdap.
<p>Contraindications for Td and Tdap</p>	<p>Td and Tdap:</p> <ul style="list-style-type: none"> • Anaphylactic reaction to any of the vaccine components. • Life threatening allergic reaction after a previous dose of DTP, DTaP, DT, Td or Tdap <p>Tdap:</p> <ul style="list-style-type: none"> • Encephalopathy not attributed to another identifiable cause within 7 days of a previous dose of a pertussis containing vaccine
<p>Precautions</p>	<p>Td, Tdap:</p> <ul style="list-style-type: none"> • Acute, moderate or severe illness with or without fever • Arthus-type hypersensitivity reactions • Guillain-Barré syndrome (GBS) within 6 wks. after a previous dose of tetanus toxoid containing vaccine <p>Tdap:</p> <ul style="list-style-type: none"> • Progressive neurological disorder, uncontrolled epilepsy, or progressive encephalopathy until treatment regimen has been established and condition stabilized
<p>Special Considerations</p>	<p>Pregnancy/Postpartum:</p> <p>Pregnant women should receive a dose of Tdap during <u>each</u> pregnancy irrespective of their prior history of receiving Tdap. Optimal timing for Tdap administration is between 27 and 36 weeks of gestation for women not previously vaccinated with Tdap. If Tdap is not administered during pregnancy, Tdap should be administered immediately postpartum.</p> <p>Wound management:</p> <p>Wound management in persons age 7 years or older with history of 3 or more doses of tetanus-toxoid-containing vaccine: For clean and minor wounds, administer Tdap or Td if more than 10 years since last dose of tetanus-toxoid-containing vaccine; for all other wounds, administer Tdap or Td if more than 5 years since last dose of tetanus-toxoid-containing vaccine. Tdap is preferred for persons age 11 years or older who have not previously received Tdap or whose Tdap history is unknown. If a tetanus-toxoid-containing vaccine is indicated for a pregnant adolescent, use Tdap. For detailed information, see https://www.cdc.gov/mmwr/volumes/69/wr/mm6903a5.htm.</p> <p>Simultaneous Administration:</p> <ul style="list-style-type: none"> • Tdap and MCV4 should be administered to adolescents 11-18 during the same visit if both vaccines are indicated and available.