National Immunisation Program

South Australia CHILDHOOD Schedule

† CAUTION brand name similarity

Updated October 2026

MEDICAL AT RISK: Check at all encounters for additional recommended vaccines. Refer to the Australian Government Department of Health website for detailed information.

Age	Disease	Vaccine	Route	Important Information
Birth	Hepatitis B	Engerix B® paediatric or HB Vax II® paediatric	IM	Within 7 days of birth
6 weeks	Diphtheria, tetanus, pertussis, hepatitis B, polio, *Haemophilus influenzae* type b (DTPa-Hep B-IPV-Hib)	Infanrix® hexa† or Vaxelis®	IM	
	Pneumococcal	Prevenar 20®	IM	
	Rotavirus	Rotarix®	Oral	Dose 1 limited to 6-14 weeks of age
	Meningococcal B	Bexsero®	IM	Prophylactic paracetamol required
4 months	Diphtheria, tetanus, pertussis, hepatitis B, polio, *Haemophilus influenzae* type b (DTPa-Hep B-IPV-Hib)	Infanrix® hexa† or Vaxelis®	IM	
	Pneumococcal	Prevenar 20®	IM	
	Rotavirus	Rotarix®	Oral	Dose 2 limited to 10-24 weeks of age
	Meningococcal B	Bexsero®	IM	Prophylactic paracetamol required
6 months	Diphtheria, tetanus, pertussis, hepatitis B, polio, *Haemophilus influenzae* type b (DTPa-Hep B-IPV-Hib)	Infanrix® hexa† or Vaxelis®	IM	
12 months	Meningococcal ACWY	Nimenrix®	IM	
	Measles, mumps, rubella (MMR)	MMR II® or Priorix®†	IM/SC	
	Pneumococcal	Prevenar 20®	IM	
	Meningococcal B	Bexsero®	IM	Prophylactic paracetamol required
	REMINDER: Hepatitis B vaccine is recommended for children who were low birth weight (<2000g) and/or preterm (<32 weeks)			
18 months	*Haemophilus influenzae* type b (Hib)	Act-HIB®	IM	
	Diphtheria, tetanus, pertussis (DTPa)	Tripacel® or Infanrix®†	IM	
	Measles, mumps, rubella, varicella (MMRV)	Priorix Tetra®†	IM/SC	
4 years	Diphtheria, tetanus, pertussis, polio (DTPa/IPV)	Infanrix IPV®† or Quadracel®	IM	

ADDITIONAL VACCINES FOR ABORIGINAL CHILDREN (The term Aboriginal is inclusive of Aboriginal and Torres Strait Islander people)

Age	Disease	Vaccine	Route	Important Information
6 months	Pneumococcal	Prevenar 20®	IM	
18 months	Hepatitis A	Vaqta® paediatric	IM	
4 years	Hepatitis A	Vaqta® paediatric	IM	
	Pneumococcal	Prevenar 20®	IM	Only if no previous doses received
9-14 years	Pneumococcal	Prevenar 20®	IM	Only if no previous doses received

FUNDED SEASONAL IMMUNISATION PROGRAMS

Influenza vaccines > 6 months of age
Refer to Annual Funded Influenza Program- South Australia Schedule

Respiratory syncytial virus (RSV) monoclonal antibody Beyfortus™ (1 April – 30 September)
Refer to Annual Funded RSV Infant Protection Program- South Australia Schedule

This Schedule changes regularly. To ensure this is the most current version, visit **sahealth.sa.gov.au/immunisationprovider**

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