

Physicians' and Nurse Practitioners' Update

August 19, 2025

From VCH Public Health

Provincial information campaign supporting immunization catch-up including measles vaccine

To support back-to-school readiness, the provincial government is promoting immunizations including measles vaccine. As a result, you may receive an increase in interest from parents to have their children's vaccinations updated. We appreciate your support in offering immunizations to children and young families.

In 2025 to date over 200 cases of measles have been reported in British Columbia, primarily in communities in Northern Health with low vaccination rates. Measles activity in BC appears to be winding down with very few cases currently active. As children head back to school, there is a concern for a potential increase in measles illness activity, especially in communities with low vaccination rates. In Vancouver Coastal Health (VCH), a total of 10 cases have been reported thus far in 2025, the majority travel associated, and five in previously immunized individuals. Infection in vaccinated people is of lower public health concern as it is associated with milder illness and much lower transmissibility. Immunization coverage of children, including measles vaccination rates, remain high in VCH, and there has been no community spread of measles to date in the region. While travel associated cases can be expected and may result in some transmission to susceptible contacts, we do not expect broader circulation in VCH schools.

Please catch up all children for routine vaccines including pertussis and MMR. We recommend that MMR vaccine be offered to children at 12 months of age and 4-6 years. An earlier second dose can be considered for those children anticipating travel to areas where the measles virus may be circulating, given a minimum of one month after the first dose. Those born prior to 1970 (health care workers born prior to 1957) do not need to be offered MMR vaccine as seroprevalence studies identify a high level of protection arising from natural exposure. For adults born 1970 or later, please check their immunization history before offering MMR as those born in Canada have likely received two doses.

HPV vaccine schedule has been simplified and publicly funded program expanded to protect more people

In alignment with the BC Cancer Control Strategy, HPV vaccine can now be offered to the following:

- **Everyone 9-26 years of age**; school age children are routinely offered this vaccine in grades 6/9
- Cisgender males, Two-spirit, transgender, or non-binary people **27-45 years of age** who self-identify as belonging to the gay, bisexual and other men who have sex with men (gbMSM) community
- Individuals **9-45 years** living with HIV
- Individuals of **any age who receive post colposcopy treatment** for cervical dysplasia on or after July 31, 2025.

HPV vaccine schedule: BC's HPV vaccine dose schedule has also changed, is consistent with accumulating evidence supporting high efficacy from one dose of this vaccine, and is based on recommendations from the National Advisory Committee on Immunization.

- Healthy individuals 9-20 years of age: **1 dose only**
- Healthy individuals 21-45 years of age: **2 doses** six months apart
- Immune compromised individuals 9-45 years: **3 doses** at 0, 2 and 6 months schedule
- Post colposcopy treatment: **3 doses** at 0, 2 and 6 months.

You can order HPV vaccine to keep on hand for eligible individuals. Practices serving a high proportion of youth or other eligible individuals can order more doses. Please check your patient's immunization history in CareConnect before offering HPV vaccine. Doses administered within your practice can be entered into Provincial Immunization Registry to enable clients to maintain complete electronic records. Further information is available at this website: www.vch.ca/en/community-vaccine-provider-resources

You can reach a Medical Health Officer at 604.675.3900 | Toll free at 1.855.675.3900
For public health emergencies after hours, contact the Medical Health Officer on call at 604.527.4893

Vancouver Coastal Health Medical Health Officers

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To receive these updates by email, please contact us at VCHPhysiciansUpdate@vch.ca

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Routine and High-Risk Infant and Childhood Immunization Schedule

Current as of August 2025. Please discard all previous schedules. Questions? Please call 604-675-3900.

AGE ¹	VACCINE ANTIGENS	TRADE NAME ²	ADMIN. SITE
2 months	Rotavirus vaccine ³ Diphtheria/Tetanus/acellular Pertussis/HB/IPV/Hib Pneumococcal conjugate Meningococcal conjugate ⁴	ROTARIX INFANRIX hexa PREVNAR 20 NEW NEISVAC-C	Oral – <i>give first</i> IM vastus lateralis IM vastus lateralis IM vastus lateralis
4 months	Rotavirus vaccine ³ Diphtheria/Tetanus/acellular Pertussis/HB/IPV/Hib Pneumococcal conjugate Meningococcal conjugate (<i>at-risk infants only</i>) ⁴	ROTARIX INFANRIX hexa PREVNAR 20 NEW	Oral – <i>give first</i> IM vastus lateralis IM vastus lateralis IM vastus lateralis
6 months	Diphtheria/Tetanus/acellular Pertussis/HB/IPV/Hib Pneumococcal conjugate (<i>at-risk infants only</i>) ⁵ Hepatitis A vaccine (<i>Indigenous children only</i>)	INFANRIX hexa PREVNAR 20 NEW VAQTA or HAVRIX 720	IM vastus lateralis IM vastus lateralis IM vastus lateralis
On or after 1st birthday	Meningococcal conjugate ⁴ Pneumococcal conjugate Varicella Measles, Mumps, Rubella (MMR)	NEISVAC-C PREVNAR 20 NEW VARILRIX or VARIVAX III PRIORIX or MMR II	IM deltoid or IM vastus lateralis SC outer triceps SC outer triceps or IM
18 months	Diphtheria/Tetanus/acellular Pertussis/IPV/Hib Hepatitis A vaccine (<i>Indigenous children only</i>)	PENTACEL VAQTA or HAVRIX 720	IM deltoid IM deltoid
K-Entry Starting age 4 years	Diphtheria/Tetanus/acellular Pertussis/IPV Measles, mumps, rubella, varicella (MMR-V)	BOOSTRIX-POLIO PROQUAD	IM deltoid SC outer triceps or IM
Grade 6	HPV – one dose NEW	GARDASIL 9	IM deltoid
Grade 9	Tetanus/diphtheria/acellular pertussis (Tdap) Meningococcal conjugate A,C,Y,W-135	BOOSTRIX NIMENRIX	IM deltoid IM deltoid
Influenza	Influenza vaccine is recommended for infants 6-59 months of age and older children with risk factors; publicly funded vaccine is available for all children.		
COVID-19 vaccine	COVID-19 vaccine is recommended for all Indigenous children, and other children 6 months and older with immune compromising conditions; one dose of publicly funded vaccine is available for all children.		
Catch – Up Vaccines	Catch up vaccines are vaccines that an eligible child may have missed previously. Public health nurses review histories and will offer these vaccines in kindergarten, grades 6 and 9.		

¹**Please follow the recommended schedule** which includes minimum age and minimum interval criteria for vaccines. Vaccines given too early or too close together may need to be repeated (e.g. MMR/V given before 12 months of age). Additional details about products and schedules for high risk infants or catching up children who are behind schedule are available in the [BC Immunization Manual](#).

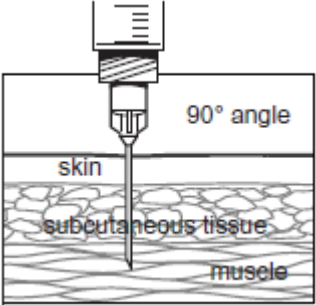
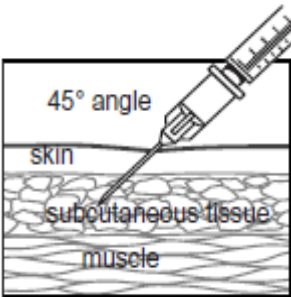
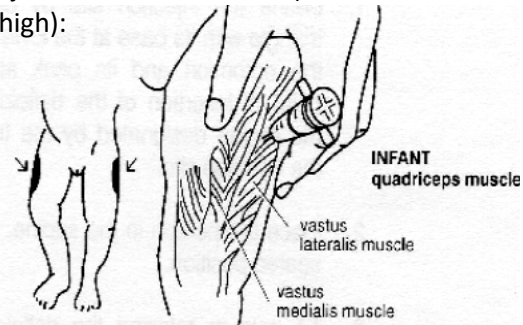
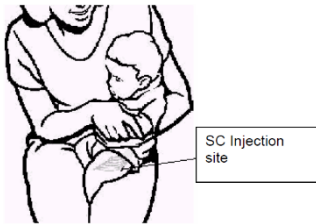
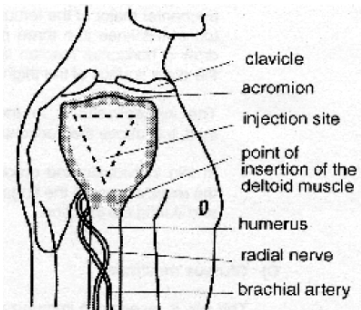
²Brand names provided in the table represent currently available products. These may change based on provincial supply.

³**Rotavirus vaccines:** For complete protection, a child needs two doses of Rotarix®. Ideally, rotavirus vaccine series should be completed using the same product. Maximum age for administering dose 1 is 20 weeks less one day, maximum age for series completion is 8 months and zero days, with a minimum interval of 4 weeks between doses.

⁴**Meningococcal conjugate C vaccine** at 2 and 12 months for healthy infants; children at high risk of meningococcal disease (e.g. those with functional or anatomic asplenia, immunodeficiency, transplant recipients) should be offered the meningococcal conjugate quadrivalent (A,C,Y,W-135, use **Menveo®** or **Nimenrix®**) free at 2, 4 and 12 months, a booster 3 years after last dose and then every 5 years. **Menactra®** can also be used starting at age 2 years.

⁵**Additional Pneumococcal protection** at 6 months is provided free for infants with the following: anatomic or functional asplenia, sickle cell disease, hemoglobinopathies, immunosuppression, transplant recipients, chronic conditions of the heart, lung, liver, or kidney, diabetes, cystic fibrosis, chronic CSF leak, chronic neurological conditions that impair clearance of oral secretions, and cochlear implant.

VACCINE ADMINISTRATION AND PAIN MANAGEMENT INFORMATION	
Tips for reducing and managing pain	<ul style="list-style-type: none"> Breastfeeding is recommended during and after vaccine administration. Give oral Rotarix® first to 2 and 4 month old infants as sucrose contained in the vaccine acts as an analgesic. Use rapid injection technique. Inject rapidly and remove the needle in one swift motion. When giving multiple injections at the same visit, give biological products that are known to cause more stinging/pain last (e.g. MMR or Varicella). Please do not administer injections into the gluteus due to increased risk of adverse reactions and lower immune response obtained at this site.

	Intramuscular (IM) injection	Subcutaneous (SC) injection
Vaccines	<ul style="list-style-type: none"> Diphtheria, Tetanus, Pertussis <i>Haemophilus influenza b</i> Hepatitis A, Hepatitis B Human papillomavirus (HPV) Influenza Meningococcal – conjugate Pneumococcal – conjugate 	<ul style="list-style-type: none"> Varicella Polio, inactivated (IPV) <p>SC or IM:</p> <ul style="list-style-type: none"> Pneumococcal – polysaccharide Measles, Mumps, Rubella (MMR, MMR-V) <p>NEW</p>
Needle & Technique	 <p>Gauge: 22-25, depending on viscosity Length: Age 0-12 years: 7/8" - 1" Age ≥12 years: 1" - 1 1/2"</p>	 <p>Gauge: 25-27 Length: Any age: 5/8" - 7/8"</p> <p>Pinching skin elevates SC tissue ensuring injection into SC tissue.</p>
Site for age <12 months Infants	<p>Inject the vastus lateralis (anterolateral thigh):</p> 	<p>Inject the fatty area of the antero-lateral thigh: <i>Note: SC vaccines are provided by exception only to clients younger than 12 months of age.</i></p> 
Site for age ≥12 months Vastus Lateralis can be used for older children with small deltoid muscle mass.	<p>Inject the deltoid muscle:</p> 	<p>Inject the upper outer triceps area:</p> 