<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Trade name/</th>
<th>Antigen</th>
<th>Available via national Immunisation Programme</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTap-IPV-Hep B/Hib</td>
<td>Infanrix-hexa® GSK</td>
<td>Diphtheria, tetanus, pertussis, polio, Hepatitis B and Haemophilus influenza type b</td>
<td>Yes – for &lt; 10 years old</td>
<td>Funding criteria: • An additional 4 doses are funded for (re-) immunization for children up to and under the age of 10 who are patients post haematopoietic stem cell transplantation, or chemotherapy; pre or post splenectomy; or other severely immunosuppressive regimens.</td>
</tr>
<tr>
<td>Tdap</td>
<td>Boostrix ® GSK</td>
<td>Diphtheria, tetanus, pertussis</td>
<td>Yes – for &gt; 7 years old to 18 years old</td>
<td>Funding criteria: • An additional four doses (as appropriate) are funded for (re-)immunisation for patients post haematopoietic stem cell transplantation or chemotherapy; pre or post splenectomy; pre- or post- solid organ transplant, renal dialysis and other severely immunosuppressive regimens Note: Tdap is not registered for patients aged less than 10 years – refer to immunization handbook.</td>
</tr>
<tr>
<td>DTap-IPV</td>
<td>Infanrix-IPV® Sanofi Pasteur</td>
<td>Diphtheria, tetanus, pertussis, polio</td>
<td>Yes – for &lt; 10 years old</td>
<td>Funding criteria: • An additional four doses (as appropriate) are funded for (re-)immunisation for patients post HSCT, or chemotherapy; pre- or post-splenectomy; pre- or post- solid organ transplant, renal dialysis and other severely immunosuppressive regimens.</td>
</tr>
<tr>
<td>IPV</td>
<td>IPOL® Sanofi Pasteur</td>
<td>Inactivated polio vaccine</td>
<td>Yes</td>
<td>Funding criteria: • For revaccination following immunosuppression.</td>
</tr>
<tr>
<td>23PPV</td>
<td>Pneumovax 23® MSD</td>
<td>23-valent polysaccharide pneumococcal</td>
<td>Yes, for high risk patients and for pre- and post-splenectomy under the age of 18 years and ≥ 2 years</td>
<td>Funding criteria: • Up to three doses for patients pre- or post-splenectomy or with functional asplenia; or • Up to two doses are funded for high risk children to the age of 18;</td>
</tr>
<tr>
<td>PCV-13</td>
<td>Prevenar 13® Pfizer</td>
<td>13-valent conjugate pneumococcal</td>
<td>Yes, for high risk programme (&lt;5 years)</td>
<td>Funding criteria: • Up to an additional four doses (as appropriate) are funded for (re-) immunisation of patients with HIV, for patients post haematopoietic stem cell transplantation HSCT, or chemotherapy; pre- or post splenectomy; functional asplenia, pre- or post- solid organ transplant, renal dialysis, complement deficiency (acquired or inherited), cochlear implants, or primary immunodeficiency.</td>
</tr>
<tr>
<td>Vaccine</td>
<td>Manufacturer</td>
<td>Type</td>
<td>Eligibility</td>
<td>Funding Criteria</td>
</tr>
<tr>
<td>---------</td>
<td>--------------</td>
<td>------</td>
<td>-------------</td>
<td>-----------------</td>
</tr>
</tbody>
</table>
| ACYW135 | Menactra® Sanofi Pasteur | Quadrivalent meningococcal ACYW-135 polysaccharide (Neisseria meningitides) | Yes, for pre- and post-splenectomy or with functional asplenia | Funding criteria:  
- Up to three doses and a booster every five years for patients pre- and post splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre or post solid organ transplant; or  
- A maximum of two doses for bone marrow transplant patients; or  
- A maximum of two doses for patients following immunosuppression*.

*Immunosuppression due to steroid or other immunosuppressive therapy must be for a period of greater than 28 days. |
| MenCCV | NeisVacC | Conjugate meningococcal C (Neisseria meningitides) | Yes, for pre- and post-splenectomy or with functional asplenia | Recommended in asplenic/hyposplenic neonates  
Funding criteria:  
- Up to 3 doses and a booster every 5 years for patients pre- and post splenectomy and for patients with functional or anatomic asplenia, or  
- One dose for close contacts of meningococcal cases; or  
- A maximum of two doses for bone marrow transplant patients; or  
- A maximum of two doses for patients following immunosuppression*.  
Note: children under seven years of age require two doses 8 weeks apart, a booster dose three years after the primary series and then five yearly. |
| Hib | ActHib ® Sanofi Pasteur | Menopvalent Haemophilus influenzae type b | Yes | Funding criteria:  
- An additional dose (as appropriate) is funded for (re-) immunisation for patients post haematopoietic stem cell transplantation, or chemotherapy; pre or post splenectomy; pre- or post-solid organ transplant, pre- or post cochlear implants, renal dialysis and other severely immunosuppressive regimens. |
| Hep B | HBvaxPRO® MSD | Hepatitis B | Yes – 2 strengths available 5µg /10µg | Funding criteria:  
- For children up to and under the age of 18 years inclusive who are considered not to have achieved a positive serology and require additional vaccination; or  
- For patients following immunosuppression; or  
- For transplant patients |
<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Trade Name</th>
<th>Disease</th>
<th>Funding</th>
<th>Funding Criteria</th>
</tr>
</thead>
</table>
| VZV     | Varilrix® GSK | Varicella zoster virus - Live vaccine | Yes – for high-risk groups and their contacts. | Funding criteria:  
• For non-immune patients: 
  1. With chronic liver disease who may in future be candidates for transplantation; or 
  2. With deteriorating renal function before transplantation; or 
  3. Prior to solid organ transplant; or 
  4. Prior to any elective immunosuppression*.  
• For patients at least 2 years after bone marrow transplantation, on advice of their specialist.  
• For patients at least 6 months after completion of chemotherapy, on advice of their specialist.  
• For household contacts of paediatric patients who are immunocompromised, or undergoing a procedure leading to immune compromise where the household contact has no clinical history of varicella.  
• For household contacts of adult patients who have no clinical history of varicella and who are severely immunocompromised, or undergoing a procedure leading to immune compromise where the household contact has no clinical history of varicella. |
| HPV     | Gardasil® MSD | Human papillomavirus | Yes | Funding criteria: Maximum of three doses for patient meeting any of the following criteria:  
• Females aged under 20 years old; or 
• Patients aged under 26 years old with confirmed HIV infection; or 
• For use in transplant (including stem cell) patients; or 
• An additional dose for patients under 26 years of age post chemotherapy. |
| MMR     | M-M-R-II® MSD | Mumps, measles, rubella | Yes | Funding criteria: A maximum of two doses for any patient meeting the following criteria:  
• For revaccination following immunosuppression; or 
• For any individual susceptible to measles, mumps or rubella; or 
• A maximum of three doses for children who have had their first dose prior to 12 months. |
| Influenza | Brand varies | Influenza virus | Yes for any cancer patient. Not funded for family members unless meet other MOH funding criteria.  
www.influenza.org.nz | Individuals aged 9 years and older receive a single dose of vaccine.  
Children aged < 9 years who have not previously received influenza vaccine require two doses four weeks apart to produce satisfactory immune response. Regardless of age, previously unvaccinated immunosuppressed or immune-deficient individuals are recommended to receive two doses of influenza vaccine, four weeks apart. |