



GOVERNMENT OF BERMUDA

Department of Health

Ministry of Health

**Bermuda Advisory Committee on Immunization Practices
(BACIP)**

Recommended Immunization Schedule for Healthy Infants, Children and Adolescents – Bermuda, 2026

AGE > VACCINE ∇	2 months	4 months	6 months	7 months	8 months	12 months	15 months	18 months	24 months	4-6 years	10 years	13-18 years
Hepatitis B ⁱ				HepB	HepB	HepB						
Rotavirus ⁱⁱ	RV	RV										
Diphtheria, Tetanus, Pertussis ⁱⁱⁱ	DTaP	DTaP	DTaP				← DTaP →			DTaP	← Tdap →	
<i>Haemophilus influenzae</i> type b ^{iv}	Hib	Hib	Hib				← Hib →					
Inactivated Poliovirus ^v	IPV	IPV	IPV				← IPV →			IPV		
Measles, Mumps, Rubella ^{vi}						MMR		MMR				
Varicella ^{vii}									VAR	VAR		
Pneumococcal - 20	PCV	PCV	PCV				← PCV →					
HPV ^{viii}											HPV	
**Influenza ^{ix}			Influenza (annual)									

This schedule indicates the recommended ages for routine administration of currently licensed childhood vaccines for children through age 18 years. Any dose not administered at the recommended age should be administered at any subsequent visit when indicated and feasible. Age ranges for vaccine administration are indicated by shaded area. All doses administered in Bermuda must be entered in the Electronic Immunization Register (EIR).

Hepatitis B vaccine (HepB). Recommended at 7 months, 8 months and 12 months of age. The 2nd dose should be given \geq 1 month after the 1st dose. The 3rd dose should be given at least 2 months after the 2nd dose and at least 4 months after the 1st dose. Children and adolescents who have not been vaccinated against hepatitis B in infancy should initiate or begin the series at age 10 years.

ii **Rotavirus (RV).** Rotarix is administered as a 2-dose series. Recommended at 2 months and 4 months of age. The 2nd dose should be given at least 4 weeks after the 1st dose. The first dose should be given before 4 months (16 weeks) and the series completed by 6 months (24 weeks)

iii **Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP) / Tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine (Tdap).** Recommended routinely for all children beginning at 2 months for the initial three to four doses of the diphtheria, pertussis and tetanus vaccination series. Combined vaccine **PENTAXIM (DTaP/IPV/HIB)** is used for the primary series and a booster using combined vaccine **TETRAXIM (DTaP/IPV)** at 4 – 6 years. Substitute Tdap for Td booster at age 11-18 years for children and adolescents who have completed the recommended primary series of DTaP.

iv **Haemophilus influenzae type b (Hib).** Recommended routinely for all children beginning at 2 months of age. Combined vaccine **PENTAXIM (Haemophilus b conjugate vaccine adsorbed reconstituted with suspension of combine diphtheria, tetanus, acellular pertussis and poliomyelitis)** may be used for the initial three to four doses of the vaccination series.

v **Inactivated poliovirus (IPV).** Recommended at 2 months, 4 months, 6 months, 18 months and 4-6 years of age. Combined vaccine **PENTAXIM (DTaP/IPV/HIB)** is recommended for the initial 3 doses of the poliovirus vaccination series. Combined vaccine **TETRAXIM (DTaP/IPV)** may be used for booster dose at 4 – 6 years of age.

vi **Measles, mumps and rubella vaccine (MMR).** Recommended 1st dose at 12 months of age. The 2nd dose should be given at 18 months; 2nd dose can be given earlier if travelling where there is a significant risk of disease. There must be an interval of at least 4 weeks between the 1st and 2nd dose.

vii **Varicella vaccine (chickenpox)** Recommended between 12 – 24 months of age with a 2nd dose given at 4 years of age.

viii **Human papilloma virus vaccine (HPV).** Recommended for females and males aged 10 years with 2 doses of **Nanavalent HPV-9** vaccine with 2nd dose given 6 -12 months after 1st dose. Catchup vaccination may be given up until age 45 years. For those who have received quadrivalent series, a single dose of nano valent may be offered.

ix **Influenza vaccine.** Recommended annually from 6 months of age, with an emphasis on infants 6 months - 2 years.

** Recommended for routine administration. Excluded from the subsidized vaccine programme.

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