

# Immunisation record (to be completed by nurse/doctor)

Age	Vaccine	Batch	Site	Date given	Sign/stamp	Note
Birth	BCG*					
	Hep B**					
	HBIG**					
6 weeks	Rotavirus					
	DTaP-IPV- Hep B/Hib					
	PCV10					
3 months	Rotavirus					
	DTaP-IPV- Hep B/Hib					
	PCV10					
5 months	DTaP-IPV- Hep B/Hib					
	PCV10					
15 months	Hib					
	MMR					
	PCV10					
	VV					
4 years	DTaP-IPV					
	MMR					

\* Children at higher risk of TB should be offered BCG.

\*\* Babies of hepatitis B carrier mothers need HBIG and hepatitis B vaccine at birth.

BCG	Bacillus Calmette-Guérin.
DTaP-IPV	Diphtheria-Tetanus-acellular Pertussis -inactivated Polio vaccine.
DTaP-IPV- Hep B/Hib	Diphtheria-Tetanus-acellular Pertussis -inactivated Polio-Hepatitis B/ <i>Haemophilus influenzae</i> type b vaccine.
HBIG	Hepatitis B immunoglobulin.
Hep B	Hepatitis B vaccine.
Hib	<i>Haemophilus influenzae</i> type b vaccine.
MMR	Measles-Mumps-Rubella vaccine.
PCV10	Pneumococcal vaccine.
VV	Varicella (chickenpox).

New Zealand Government

