

# Understanding Immunization Records from Outside the United States

## *Quick Reference Guides*

### Who Are These Guides For?

These reference guides are intended to help school nurses, administrative staff and healthcare providers accurately understand immunization records from other countries.

### How Can I Use These Guides?

- Access basic information about vaccination schedules in select countries
- Compare these schedules to the immunizations required for child care and school entry in Washington state.
- Find other information that may help you understand immunization records from outside the U.S.

### General Tips for Using These Guides and Understanding Immunization Records from Other Countries:

- These charts use the symbols = and ≠ (equal and not equal) to indicate where a country's immunization schedule meets or does not meet the Washington school and child care requirements. However, due to differences in specific products, including countries which offer multiple products to meet certain disease immunization requirements, these symbols only indicate approximate matches between the Country's schedule and State standards.
- Oral polio virus (OPV) vaccination doses administered after April 1, 2016, are **INVALID** in the United States. CDC immunization schedules specify trivalent polio vaccine, which includes Inactivated Polio Vaccine (IPV). However, if you see OPV doses listed on a record, these *should still be entered* in the Washington Immunization Information System (WAIIS). The system will recognize these doses and calculate them correctly.
- Some vaccines are administered in other countries but not routinely recommended in the U.S. or required for school. These include Yellow Fever, Typhoid, Bacille Calmette-Guerin (BCG) for Tuberculosis. These vaccines should still be included in a patient's record.
- Many countries offer the PCV10 Pneumococcal Vaccine Conjugate in their National Immunization Programs and list this product on their vaccine schedules. This product does meet the Washington state child care immunization requirement for pneumococcal disease immunization.
- If you are not reasonably sure of a vaccine translation, it is best to omit that vaccine from the record and refer the patient to receive the necessary vaccine. Strive to only administer necessary vaccines, while also ensuring that patients are fully up to date on recommended vaccines. Receiving duplicate vaccines does not pose any health risk to most patients.

- Some common vaccine products provide similar protection to those used in the U.S. but have slightly different names and formulations. The most common notation for the country has been used in this guide. Some of these products include:
  - DTwP: This vaccine, frequently found in combination products, is comparable to DTaP in the U.S. The letter *w* indicates a whole-cell inactivated pertussis vaccine; a lower case *a* indicates an acellular pertussis component. DTwP is a less expensive option and is more frequently used in low-income nations. These products provide the same level of protection.
  - Many countries use combination vaccines. These contain multiple vaccines grouped into a single product. The reference guides list the individual components. The names appear in bold letters to allow easy comparison with the most common U.S. products.
- These guides were developed using information from the Washington Department of Health's (DOH) 2024-2025 Individual Vaccine Requirements Summary. More information about school and child care requirements are on the DOH [School and Child Care Immunization page](#).

# Angola

Official Name: Republic of Angola

Language: Angolan Portuguese

Calendar: Gregorian

Date Format: DD/MM/YY

Angola National Vaccine Schedule					Washington School Entry Requirements, PS-12			
Vaccine	Doenças Evitáveis por Vacinação	Dose	Age	=	Vaccine	Vaccine Preventable Disease	Required Doses	By Grade
DTwp-Hib-HepB (Vacina conjugada 5 em 1)	Difteria, Haemophilus Influenza (Hib), Hepatite B, <b>Tosse convulsa, Tétano</b>	1 <sup>st</sup> dose	2 M	≠	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	4M				5 doses DTaP	Preschool/Kindergarten (4 - <5)
		3 <sup>rd</sup> dose	6M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade
							5 doses DTap+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade
							5 doses DTap + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade
MR	Sarampo Rubéola	1 <sup>st</sup> dose	9 M	≠	MMR	Measles Mumps Rubella	1 <sup>st</sup> dose	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	15 M				2 <sup>nd</sup> dose	Kindergarten
IPV	Poliomielite	1 <sup>st</sup> dose	4 M	=	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)
OPV	Poliomielite	2 <sup>nd</sup> dose	9 M				2 <sup>nd</sup> dose (10 W)	
		1 <sup>st</sup> dose	Birth				3 <sup>rd</sup> dose (14 W)	
		2 <sup>nd</sup> dose	2 M				4 <sup>th</sup> dose (4 Y)	4 doses by kindergarten
		3 <sup>rd</sup> dose	4 M					
4 <sup>th</sup> dose	6 M							
PCV13	doença pneumocócica	1 <sup>st</sup> dose	2 M	≠	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool Not required for K- 12
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	6 M				3 <sup>rd</sup> dose (14 W)	
							4 <sup>th</sup> dose (12 M)	
Hepatitis B	Hepatite B	Single Dose	Birth	=	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool (19M - <4 Y)
DTwp-Hib- <b>HepB</b> (5 in 1 conjugate vaccine)	Diphtheria, Haemophilus	1 <sup>st</sup> dose	2 M				2 <sup>nd</sup> dose (4 W)	
		2 <sup>nd</sup> dose	4 M				3 <sup>rd</sup> dose (24 W)	
		3 <sup>rd</sup> dose	6 M					

	Influenza (Hib), <b>HepB</b> , Pertussis, Tetanus							3 doses required for K-12
DTwp- <b>Hib</b> -HepB (Vacina conjugada 5 em 1)	difteria, <b>Haemophilus Influenza (Hib)</b> , Hep Hepatitis B, Tosse convulsa, tétano	1 <sup>st</sup> dose	2 M	=	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine <sup>1</sup> ) by Preschool  Not required for K- 12
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	6 M				3 <sup>rd</sup> dose (14 W)	
							4 <sup>th</sup> dose (12 M)	
Varicella	Varicela	<i>Not included in schedule</i>	<i>Not included in schedule</i>	≠	Varicella VAR	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)
							2 <sup>nd</sup> dose (15 M)	2 doses required for kindergarten – 12 <sup>th</sup> Grade

<sup>1</sup> For more information about specific Hib vaccines and accepted schedules, please reference: [Individual Vaccine Requirements Summary School Year 2024-2025 \(wa.gov\)](https://www.wa.gov) pages 10-12. If the record does not specify which vaccine was used, default to the 4-dose schedule.

## ANGOLA – TIPS & TRICKS

- Children in Angola have the greatest access to healthcare during the first year of life. Therefore, the Angola vaccination schedule and associated vaccination campaigns front-load vaccines in infancy. This may decrease the likelihood of children meeting Washington state school vaccination requirements.
- Retinol (Vitamin A) is given to children at age 6 months. Although it is classified as a supplement, it is included in the routine immunization schedule in Angola.
- Vaccine coverage overall in Angola is around 50% for routinely recommended vaccines, across all age groups.
- The majority of recent arrivals to the U.S. from Angola have been away from their home country for at least a year, often spending time in refugee camps and other settings where access to vaccinations may be limited. This is especially true if the child left prior to age one.
- It is reasonable to assume that asylum seekers from Angola, especially children, are not up to date on vaccines.
- Varicella is not included in the routinely recommended vaccine schedule in Angola.



**CALENDÁRIO BÁSICO DE VACINAÇÃO DE ROTINA**

**ADVERTÊNCIA**  
Não administrar a vacina Rubéola a crianças menores de 15 meses de idade.

**AVANÇADA**  
Apresente sempre este cartão em todas as consultas.

**CARTÃO DE SAÚDE INFANTIL**  
Instituto Nacional de Saúde  
Ministério da Saúde

Nº do Cartão: \_\_\_\_\_ Peso à nascença: \_\_\_\_\_

Nome da criança: \_\_\_\_\_

Data de Nascimento: \_\_\_\_\_ Naturalidade: \_\_\_\_\_

Mãe: \_\_\_\_\_

Pai: \_\_\_\_\_

Morada: \_\_\_\_\_

Parto:  Em casa  Normal  Unid. Sanitária  Cesariana  APGAR  Distóxico

Unidade Sanitária: \_\_\_\_\_

Responsável: \_\_\_\_\_

de \_\_\_\_\_ de \_\_\_\_\_



Nº do Cartão \_\_\_\_\_

**CARTÃO DE VACINAÇÃO DA MULHER EM IDADE FÉRTIL**

Nome \_\_\_\_\_

Pai \_\_\_\_\_

Mãe \_\_\_\_\_

Data de Nascimento \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Residência \_\_\_\_\_

Unidade Sanitária \_\_\_\_\_

Município \_\_\_\_\_ de \_\_\_\_\_ de \_\_\_\_\_

Responsável \_\_\_\_\_

Data da Próxima Vacinação

DIA	MÊS	ANO

**VACINA CONTRA O TÉTANO (Td)**

**1ª DOSE** \_\_\_\_\_

Depois de um mês **2ª DOSE** \_\_\_\_\_

Depois de seis meses **3ª DOSE** \_\_\_\_\_

Depois de um ano **4ª DOSE** \_\_\_\_\_

Depois de um ano **5ª DOSE** \_\_\_\_\_

**Cinco doses da vacina contra o Tétano dá protecção à mulher para toda a vida**

# Colombia

Official Name: Republic of Colombia

Language: Spanish

Calendar: Gregorian

Date Format: DD/MM/YY

Colombia National Vaccine Schedule					Washington School Entry Requirements, PS-12						
Vaccine	Vaccine Preventable Disease(s)	Dose	Age	≡	Vaccine	Vaccine Preventable Disease(s)	Required Doses	By Grade			
DTwp+Hib+He pB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	≡	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)			
		2 <sup>nd</sup> dose	4 M				5 doses DTaP	Preschool/Kindergarte n (4 - <5)			
		3 <sup>rd</sup> dose	6 M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade			
		4 <sup>th</sup> dose	18 M				5 doses DTap+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade			
DT	Difteria Tétanos	1 <sup>st</sup> dose	2 M				≡	MMR	Measles Mumps Rubella	5 doses DTap + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade
		2 <sup>nd</sup> dose	4 M								
		3 <sup>rd</sup> dose	6 M								
		4 <sup>th</sup> dose	18 M								
		5 <sup>th</sup> dose	5 Y								
DTwp	Difteria, Tos ferina, Tétanos	1 <sup>st</sup> dose	18 M				≡	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose	Preschool (19M - <4)
		2 <sup>nd</sup> dose	5 Y	2 <sup>nd</sup> dose	Kindergarten						
Triple Viral SRP (MMR)	Sarampión Paperas Rubéola	1 <sup>st</sup> dose	13 M	≡	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)			
		2 <sup>nd</sup> dose	5 Y				2 <sup>nd</sup> dose (10 W)				
IPV	Poliomielitis	1 <sup>st</sup> dose	2 M	≡	IPV or OPV	Poliomyelitis	3 <sup>rd</sup> dose (14 W)		4 doses by kindergarten		
		2 <sup>nd</sup> dose	4 M				4 <sup>th</sup> dose (4 Y)				
		3 <sup>rd</sup> dose	6 M								
		4 <sup>th</sup> dose	18 M								
Sabin (OPV)	Poliomielitis	1 <sup>st</sup> dose	18 M	≡	IPV or OPV	Poliomyelitis	4 <sup>th</sup> dose (4 Y)	4 doses by kindergarten			
		2 <sup>nd</sup> dose	5 Y								

PCV10	Enfermedad neumocócica	1 <sup>st</sup> dose	2 M	■	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool (19M- <4 Y)	
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)		
		3 <sup>rd</sup> dose	12 M				3 <sup>rd</sup> dose (14 W)		
							4 <sup>th</sup> dose (12 M)		
								Not required for K-12	
Antihepatitis B pediátrico	Hepatitis B	1 <sup>st</sup> dose	Birth	■	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool (19 M - <4 Y)	
							2 <sup>nd</sup> dose (4 W)		
									3 <sup>rd</sup> dose (24 W)
DTwp-Hib- <b>HepB</b> (Pentavalente)	Difteria, Haemophilus Influenza (Hib), <b>Hepatitis B</b> , Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	■					
		2 <sup>nd</sup> dose	4 M						
		3 <sup>rd</sup> dose	6 M						
		4 <sup>th</sup> dose	18 M						
DTwp+Hib+He pB (Pentavalente)	Difteria, <b>Haemophilus Influenza (Hib)</b> , Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	■	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine <sup>2</sup> ) by Preschool (19 M - <4 Y)	
		2 <sup>nd</sup> dose	4 M						2 <sup>nd</sup> dose (10 W)
		3 <sup>rd</sup> dose	6 M						3 <sup>rd</sup> dose (14 W)
		4 <sup>th</sup> dose	18 M						4 <sup>th</sup> dose (12 M)
								Not required for K-12	
Varicella (VAR)	Varicela	1 <sup>st</sup> dose	13 M	■	Varicella (VAR)	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)	
		2 <sup>nd</sup> dose	5 Y				2 <sup>nd</sup> dose (15 M)	2 doses required for kindergarten – 12 <sup>th</sup> Grade	

<sup>2</sup> For more information about specific Hib vaccines and accepted schedules, please reference: [Individual Vaccine Requirements Summary School Year 2024-2025 \(wa.gov\)](#) pages 10-12. If the record does not specify which vaccine was used, default to the 4-dose schedule.

## COLOMBIA – TIPS & TRICKS

- Colombia has been a part of the World Health Organization's (WHO) Expanded Program on Immunization (EPI) since 1979. While this has dramatically increased universal access to vaccines, overall rates have declined since 2010.
- Vaccine coverage rates vary greatly between regions, though most routine vaccinations (pentavalent, MMR, and BCG) are above 90% country wide.
- Vaccine completion rates decline with age; younger children are more likely to have received all recommended vaccines. Children from Urban centers are also more likely to have had access to vaccine completion.
- Children may receive either OPV or IPV, depending upon location and access.
- Colombia provides immunizations free of charge. Access to private health insurance does appear to be correlated with vaccine completion. This is likely due to overall health care access.

PROGRAMA DE CRECIMIENTO Y DESARROLLO GRATUITO  
IDENTIFICACIÓN E INSCRIPCIÓN TEMPORARIA

Al momento de nacer Fecha: \_\_\_\_\_

PRIMER CONTROL MEDICO  
Durante el primer mes de vida Fecha: \_\_\_\_\_

SEGUIMIENTO POR ENFERMERIA

Edad	Fecha de cita programada	Fecha en que asistió	Profesional que atendió
1 a 3 meses			
4 a 6 meses			
7 a 9 meses			
10 a 12 meses			
13 a 16 meses			
17 a 20 meses			
21 a 24 meses			
25 a 30 meses			
31 a 36 meses			
37 a 48 meses			
49 a 60 meses			
61 a 66 meses			
67 a 72 meses			
73 a 78 meses			
79 a 84 meses			
8 años (1)			
8 años (2)			
9 años			

Todos los niños deben recibir suplementos con Hierro y Vitamina A, cada 6 meses desde los 6 meses hasta los 5 años de edad, de acuerdo al protocolo de la estrategia AIEPI.

Edad	Fecha	Edad	Fecha
6 meses		42 meses	
12 meses		48 meses	
18 meses		54 meses	
24 meses		60 meses	
36 meses		66 meses	

En todos los niños se debe realizar toma de TSH al momento de nacer para estudio de hipotiroidismo.

Valor reportado TSH: \_\_\_\_\_  
Fecha verificación: \_\_\_\_\_  
Profesional que verificó: \_\_\_\_\_

**Exijalo**

Vacunar oportunamente con todas las dosis a sus hijos, garantiza la protección frente a enfermedades como: Poliomielitis, Difteria, Tétanos, Tosferina, Hepatitis, Enfermedad diarreica producida por rotavirus, Neumonías, Meningitis, tuberculosis, Fiebre amarilla, Sarampión, Paperas, Meningitis por Haemophilus influenza tipo B, Rubéola e Influenza.

**Edad de aplicación de las vacunas a los niños y niñas menores de 6 años**

\* Cualquier día es bueno para vacunar a sus hijos.  
\* En Colombia todos los días son días de vacunación.  
\* Es fácil, gratis y sobre todo muy importante.

República de Colombia  
Ministerio de Salud y Protección Social  
Dirección de Promoción y Prevención  
Subdirección de Enfermedades Transmisibles  
Programa Ampliado de Inmunizaciones  
www.minsalud.gov.co  
Atención al Ciudadano: 018000 95 25 25

**AIEPI**  
de cero a siempre

**MinSalud**

**Vacunas al día, se la ponemos fácil**

**CARNÉ DE VACUNACIÓN**

Nombre: \_\_\_\_\_  
Fecha de nacimiento: \_\_\_\_\_  
Nº de certificado de nacido vivo: \_\_\_\_\_  
Registro civil: \_\_\_\_\_  
Sexo: \_\_\_\_\_  
Grupo sanguíneo: \_\_\_\_\_  
Peso al nacer: \_\_\_\_\_  
Dirección: \_\_\_\_\_  
Teléfono: \_\_\_\_\_  
Responsable: \_\_\_\_\_  
Municipio de residencia: \_\_\_\_\_  
Departamento: \_\_\_\_\_

**Recuerda:**  
Estas vacunas son gratuitas

**PROSPERIDAD PARA TODOS**



# DRC (Democratic Republic of the Congo)

**Official Name:** Democratic Republic of the Congo

**Language:** French

**Calendar:** Gregorian

**Date Format:** DD/MM/YY

D.R. Congo National Vaccine Schedule					Washington School Entry Requirements, PS-12			
Vaccine	Vaccine Preventable Disease(s)	Dose	Age	=	Vaccine	Vaccine Preventable Disease(s)	Required Doses	By Grade
DTwp-Hib-HepB (5 in 1 conjugate vaccine)	Diphtérie, Grippe à Haemophilus (Hib), Hépatite B, Coqueluche, Tétanos	1 <sup>st</sup> dose	2 M	≠	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	3 M				5 doses DTaP	Preschool/Kindergarten (4 - <5)
		3 <sup>rd</sup> dose	4M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade
							5 doses DTap+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade
							5 doses DTap + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade
MR	Rougeole Rubéole	1 <sup>st</sup> dose	9 M	≠	MMR	Measles Mumps Rubella	1 <sup>st</sup> dose	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	15 M				2 <sup>nd</sup> dose	Kindergarten
IPV	Poliomyélite	1 <sup>st</sup> dose	4 M	=	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)
OPV	Poliomyélite	1 <sup>st</sup> dose	Birth				2 <sup>nd</sup> dose (10 W)	
		2 <sup>nd</sup> dose	2 M				3 <sup>rd</sup> dose (14 W)	
		3 <sup>rd</sup> dose	3 M				4 <sup>th</sup> dose (4 Y)	4 doses by kindergarten
		4 <sup>th</sup> dose	4 M					
PCV13	Maladie Pneumococcique	1 <sup>st</sup> dose	2 M	≠	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool Not required for K-12
		2 <sup>nd</sup> dose	3 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	4 M				3 <sup>rd</sup> dose (14 W)	
							4 <sup>th</sup> dose (12 M)	
DTwp-Hib-HepB (5 in 1 conjugate vaccine)	Diphtérie, Grippe à Haemophilus (Hib), Hépatite B,	1 <sup>st</sup> dose	2 M	=	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	3M				2 <sup>nd</sup> dose (4 W)	
		3 <sup>rd</sup> dose	4 M				3 <sup>rd</sup> dose (24 W)	

	Coqueluche, Tétanos							3 doses required for K-12
DTwp- <b>Hib</b> -HepB (5 in 1 conjugate vaccine)	Diphtérie, <b>Grippe à Haemophilus (Hib)</b> , Hépatite B, Coqueluche, Tétanos	1 <sup>st</sup> dose	2 M	=	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine <sup>3</sup> ) by Preschool  Not required for K- 12
		2 <sup>nd</sup> dose	3 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	4 M				3 <sup>rd</sup> dose (14 W)	
							4 <sup>th</sup> dose (12 M)	
Varicella	Varicelle	<i>Not included in schedule</i>	<i>Not included in schedule</i>	≠	Varicella VAR	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)  2 doses required for kindergarten – 12 <sup>th</sup> Grade
							2 <sup>nd</sup> dose (15 M)	

<sup>3</sup> For more information about specific Hib vaccines and accepted schedules, please reference: [Individual Vaccine Requirements Summary School Year 2024-2025 \(wa.gov\)](#) pages 10-12. If the record does not specify which vaccine was used, default to the 4-dose schedule.

Democratic Republic of the Congo – TIPS & TRICKS

- Children in the DRC have the greatest access to healthcare during the first year of life. Therefore, the DRC vaccination schedule and associated vaccination campaigns front-load vaccines in infancy. This may decrease the likelihood of children meeting Washington state school vaccination requirements.
- Retinol (Vitamin A) is given to children at age 6 months. Although it is classified as a supplement, it is included in the routine immunization schedule in the DRC.
- Vaccine coverage in the DRC varies from 30% to 75%. Urban areas have higher vaccine coverage rates than to remote villages.
- The majority of recent arrivals to the U.S. from DRC have been away from their home country for at least a year, often spending time in refugee camps and other settings where access to vaccinations may be limited. This is especially true if the child left prior to turning 1 year old.
- It is reasonable to assume that asylum seekers from the DRC, especially children, are not up to date on vaccines.
- Varicella is not included in the routine immunization schedule in the DRC.
- The most common combination vaccine for measles and rubella *does not* include a mumps component. Children will need to receive the MMR (measles, mumps, rubella) vaccine in order to meet Washington state requirements.
- Other vaccines included in DRC's schedule that are not routinely recommended in the U.S. include: BCG (Tuberculosis), Rotateq (gastroenteritis), and Imvanex (Mpox) during outbreaks.

**VACCINATIONS**

VACCIN	RESEAU/USUS	VACCINATION PRECISEE	USU
BCG			
POLIO	1		
	2		
	3		
RAPPEL			
DT COG	0		
	1		
	2		
	3		
RAPPEL			
VAR			
VAAL			
HB			
Autres			

**FICHE DE SURVEILLANCE DE L'ENFANT**

Centre: \_\_\_\_\_ N° carte: \_\_\_\_\_  
 Nom: \_\_\_\_\_ Sexe: \_\_\_\_\_  
 Prénoms: \_\_\_\_\_  
 Date et lieu de naissance: \_\_\_\_\_  
 Date et lieu de déclaration: \_\_\_\_\_  
 Déclaration de grossesse (Docteur ou sage-femme): \_\_\_\_\_

Accouchement: \_\_\_\_\_  
 Nom du médecin du pédiatre: \_\_\_\_\_  
 Nom du gynécologue de la mère: \_\_\_\_\_  
 Profession: \_\_\_\_\_  
 Adresse: \_\_\_\_\_  
 Numéro de téléphone et adresse postale: \_\_\_\_\_

**EXAMEN DE LABORATOIRE**

Date	Type d'examen	Résultats
	GROUPE SANGUIN	
	FACTEUR RH	
	TEXT D'EMBEL	
	ELECTROPHO RE	
	DOSSAGE GP 40	

LE VACCIN/PROTEGE L'ENFANT CONTRE LES MALADIES

LE LAIT MATERNEL EST LE MEILLEUR NUTRIMENT POUR VOTRE ENFANT. DONNEZ-LE LUI LE PLUS LONGTEMPS POSSIBLE.

**VACCINATIONS**

VACCIN	RESEAU/USUS	VACCINATION PRECISEE	USU	Signature et cachet du Médecin
BCG				
POLIO	0			
	1			
	2			
	3			
RAPPEL				
DT COG	0			
	1			
	2			
	3			
RAPPEL				
VAR				
VAAL				
HB				
Autres				

**SUPPLEMENTATION EN VITAMINE A**

	1	2	3	4	5
Évaluation	12 mois	18 mois	24 mois	30 mois	36 mois
Prévu	Prévu	Prévu	Prévu	Prévu	Prévu
Réçu	Réçu	Réçu	Réçu	Réçu	Réçu
6	7	8	9	10	
36 mois	42 mois	48 mois	54 mois	60 mois	
Prévu	Prévu	Prévu	Prévu	Prévu	
Réçu	Réçu	Réçu	Réçu	Réçu	

**EXAMENS DE LABORATOIRE**

Date	Type d'examen	Résultats
	GROUPE SANGUIN	
	FACTEUR RH	
	TEXT D'EMBEL	
	ELECTROPHO RE	
	DOSSAGE GP 40	

# Guatemala

Official Name: Republic of Guatemala Language: Spanish Calendar: Gregorian Date Format: DD/MM/YY or YY/MM/DD

Guatemala National Vaccine Schedule					Washington School Entry Requirements, PS-12						
Vaccine	Vaccine Preventable Disease(s)	Dose	Age	=	Vaccine	Vaccine Preventable Disease(s)	Required Doses	By Grade			
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	≠	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)			
		2 <sup>nd</sup> dose	4 M				5 doses DTaP	Preschool/Kindergarten (4 - <5)			
		3 <sup>rd</sup> dose	6M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade			
DTwp	Difteria, Tos ferina, Tétanos	1 <sup>st</sup> dose	18 M				5 doses DTap+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade			
		2 <sup>nd</sup> dose	4 Y				5 doses DTap + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade			
Td	Difteria Tétanos	1 <sup>st</sup> dose	10 Y								
Triple Viral SRP (MMR)	Sarampión Paperas rubéola	1 <sup>st</sup> dose	12 M	=	MMR	Measles Mumps Rubella	1 <sup>st</sup> dose	Preschool (19M - <4 Y)			
		2 <sup>nd</sup> dose	18 M				2 <sup>nd</sup> dose	Kindergarten			
		Catch-Up	7 -15 Y								
IPV	Poliomielitis	1 <sup>st</sup> dose	2 M	=	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)			
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)				
		Catch-up	7-15 Y				3 <sup>rd</sup> dose (14 W)				
Sabin (OPV)	Poliomielitis	1 <sup>st</sup> dose	6 M				=			4 <sup>th</sup> dose (4 Y)	4 doses by kindergarten
		2 <sup>nd</sup> dose	18 M								
		3 <sup>rd</sup> dose	4 Y								
PCV13	Enfermedad neumocócica	1 <sup>st</sup> dose	2 M	≠	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool <b>Not required for K-12</b>			
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)				
		3 <sup>rd</sup> dose	12 M				3 <sup>rd</sup> dose (14 W)				
4 <sup>th</sup> dose (12 M)											

Antihepatitis B Pediatric Hepatitis B Vaccine	Hepatitis B	1 <sup>st</sup> dose	Birth	=	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool (19M - <4 Y)	
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), <b>Hepatitis B</b> , Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M		=			2 <sup>nd</sup> dose (4 W)	3 doses required for K-12
		2 <sup>nd</sup> dose	4 M					3 <sup>rd</sup> dose (24 W)	
		3 <sup>rd</sup> dose	6 M						
DTwp- <b>Hib</b> -HepB (5 in 1 conjugate vaccine)	Difteria, <b>Haemophilus Influenza (Hib)</b> , Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	=	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine <sup>4</sup> ) by Preschool  <b>Not required for K-12</b>	
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10W)		
		3 <sup>rd</sup> dose	6 M				3 <sup>rd</sup> dose (14 W)		
							4 <sup>th</sup> dose (12-15 M)		
Varicella	Varicela	<i>Not included in schedule</i>	<i>Not included in schedule</i>	+	Varicella VAR	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)	
							2 <sup>nd</sup> dose (15 M)	2 doses required for K-12	

<sup>4</sup> For more information about specific Hib vaccines and accepted schedules, please reference: [Individual Vaccine Requirements Summary School Year 2024-2025 \(wa.gov\)](#) pages 10-12. If the record does not specify which vaccine was used, default to the 4-dose schedule.

## GUATAMALA – TIPS & TRICKS

- Barriers to immunization in Guatemala are due primarily to lack of access, which varies based on geography. Guatemala has 22 geographical departments.
  - Totonicapán, Sololá, Suchitepéquez, Guatemala, and Jalapa are considered low coverage departments. Children and adolescents from these areas may have had less access to vaccinations and other basic health care.
- Guatemala's immunization program is well regarded. Vaccinations are free in public health care facilities and there is a strong cultural belief in the importance of immunization.
- Approximately 60% of Guatemala's population lives below the national poverty line, with 9% living in extreme poverty, as defined by the WHO.
- Varicella is not included in the routine immunization schedule in Guatemala.

### ¿Cómo se desarrolla mi niño?

	de 4 a 7 meses El niño se sienta sin apoyo	Estad atento a los pies
	de 5 a 11 meses y medio El niño se para con ayuda	Estad atento a los pies
	de 5 a 15 meses y medio El niño gata sobre manos y rodilla	Estad atento a los pies
	de 4 a 14 meses El niño camina con ayuda	Estad atento a los pies
	de 7 a 17 meses El niño se pone de pie solo	Estad atento a los pies
	de 8 a 18 meses y medio El niño camina solo	Estad atento a los pies



MINISTERIO DE SALUD PÚBLICA  
Y ASISTENCIA SOCIAL DE GUATEMALA

**Carné  
del niño**

No. Registro:

Día:  Mes:  Año:

Ciudad:

Nombre del Niño:

Fecha de nacimiento: Día:  Mes:  Año:

Nombre de la Madre o Responsable:

Nombre del Padre:

Número de teléfono:

Número de casa:  Número de sector:

Comunidad / Dirección:

Municipio:

Provincia:  Departamento:  Municipio:

Año de salud:  Distrito:

Centro de Salud:  Puesto de Salud:

Jurisdicción:

Centro de Convergencia:

# Mexico

Official Name: United Mexican States Language: Spanish Calendar: Gregorian Date Format: DD/MM/YY

Vaccine	Vaccine Preventable Disease(s)	Dose	Age	=	Vaccine	Vaccine Preventable Disease(s)	Required Doses	By Grade
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	=	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	4M				5 doses DTaP	Preschool/Kindergarten (4 - <5)
		3 <sup>rd</sup> dose	6M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade
		4 <sup>th</sup> dose	18 M				5 doses DTaP+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade
Td (toxoides tetánico y difteria para niños mayores y adultos)	Difteria Tétanos	1 <sup>st</sup> dose	10 Y				5 doses DTaP + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade
Triple Viral SRP (MMR)	Sarampión Parotiditis Rubéola	1 <sup>st</sup> dose	12 M	=	MMR	Measles Mumps Rubella	1 <sup>st</sup> dose	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	18 M				2 <sup>nd</sup> dose	Kindergarten
Sabin OPV	Poliomielitis	1 <sup>st</sup> dose	2 M	≠	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	6M				3 <sup>rd</sup> dose (14 W)	4 doses by kindergarten
			4 <sup>th</sup> dose (4 Y)					
PCV13	Enfermedad neumocócica	1 <sup>st</sup> dose	2 M	≠	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool Not required for K-12
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
							3 <sup>rd</sup> dose (14 W)	
							4 <sup>th</sup> dose (12 M)	

Antihepatitis B pediátrico	Hepatitis B	1 <sup>st</sup> dose	Birth	=	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool						
DTwp+Hib+HepB (Pentavalente)	Diphtheria, Haemophilus Influenza (Hib), <b>HepB</b> , Pertussis, Tetanus	1 <sup>st</sup> dose	2 M		=				2 <sup>nd</sup> dose (4 W)					
		2 <sup>nd</sup> dose	4 M						=			3 <sup>rd</sup> dose (24 W)		
		3 <sup>rd</sup> dose	6 M									=		
		4 <sup>th</sup> dose	18 M											
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), <b>Hepatitis B</b> , Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	=	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine) by Preschool  Not required for K-12						
2 <sup>nd</sup> dose	4 M	2 <sup>nd</sup> dose (10 W)												
3 <sup>rd</sup> dose	6 M	3 <sup>rd</sup> dose (14 W)												
4 <sup>th</sup> dose	18 M	4 <sup>th</sup> dose (12 M)												
Varicela	Varicela	<i>Not included in schedule</i>	<i>Not included in schedule</i>	≠	Varicella VAR	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)						
							2 <sup>nd</sup> dose (15 M)	2 doses required for kindergarten – 12 <sup>th</sup> Grade						





# Venezuela

Official Name: Bolivarian Republic of Venezuela

Language: Spanish

Calendar: Gregorian

Date Format: DD/MM/YY

Vaccine	Vaccine Preventable Disease(s)	Dose	Age	=	Vaccine	Vaccine Preventable Disease(s)	Required Doses	By Grade
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), Hepatitis B, Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	=	DTaP/Tdap	Diphtheria, Tetanus, Pertussis	4 doses DTaP	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	4M				5 doses DTaP	Preschool/Kindergarten (4 - <5)
		3 <sup>rd</sup> dose	6M				5 doses DTaP	Kindergarten – 6 <sup>th</sup> Grade
		4 <sup>th</sup> dose	18M				5 doses DTaP+ Tdap at ≥10 Y	7 <sup>th</sup> – 10 <sup>th</sup> Grade
		5 <sup>th</sup> dose	5 Y				5 doses DTaP + Tdap at ≥ 7 Y	11 <sup>th</sup> – 12 <sup>th</sup> grade
Td (toxoides tetánico y difteria para niños mayores y adultos)	Difteria Tétanos	1 <sup>st</sup> dose	10 Y					
Triple Viral SRP (MMR)	Sarampión Paperas Rubéola	1 <sup>st</sup> dose	12 M	=	MMR	Measles Mumps Rubella	1 <sup>st</sup> dose	Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	18 M				2 <sup>nd</sup> dose	Kindergarten
IPV	Poliomielitis	1 <sup>st</sup> dose	2 M	≠	IPV or OPV	Poliomyelitis	1 <sup>st</sup> dose (6 W)	3 doses by Preschool (19M - <4 Y)
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
Sabin OPV	Poliomielitis	1 <sup>st</sup> dose	6 M	≠			3 <sup>rd</sup> dose (14 W)	
		2 <sup>nd</sup> dose	18 M				4 <sup>th</sup> dose (4 Y)	
		3 <sup>rd</sup> dose	5 Y					
PCV13	Enfermedad neumocócica	1 <sup>st</sup> dose	2 M	≠	PCV13	Pneumococcal disease	1 <sup>st</sup> dose (6 W)	4 doses required for preschool
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	

		3 <sup>rd</sup> dose	12 M				3 <sup>rd</sup> dose (14 W) 4 <sup>th</sup> dose (12 M)	Not required for K-12
Antihepatitis B pediátrico	Hepatitis B	1 <sup>st</sup> dose	Birth	=	Hep B	Hepatitis B	1 <sup>st</sup> dose (birth)	3 doses required by Preschool
DTwp+Hib+HepB (Pentavalente)	Diphtheria, Haemophilus Influenza (Hib), <b>HepB</b> , Pertussis, Tetanus	1 <sup>st</sup> dose	2 M				2 <sup>nd</sup> dose (4 W)	
		2 <sup>nd</sup> dose	4 M				3 <sup>rd</sup> dose (24 W)	
		3 <sup>rd</sup> dose	6 M					
		4 <sup>th</sup> dose	18 M					
5 <sup>th</sup> dose	5 Y							
DTwp+Hib+HepB (Pentavalente)	Difteria, Haemophilus Influenza (Hib), <b>Hepatitis B</b> , Tos Ferina, Tétanos	1 <sup>st</sup> dose	2 M	=	<i>Haemophilus influenzae</i> type B	Haemophilus Influenza (Hib)	1 <sup>st</sup> dose (6 W)	3 or 4 doses (depending on vaccine) by Preschool
		2 <sup>nd</sup> dose	4 M				2 <sup>nd</sup> dose (10 W)	
		3 <sup>rd</sup> dose	6 M				3 <sup>rd</sup> dose (14 W)	Not required for K-12
		4 <sup>th</sup> dose	18 M				4 <sup>th</sup> dose (12 M)	
		5 <sup>th</sup> dose	5 Y					
Varicela	Varicela	Not included in schedule	Not included in schedule	≠	Varicella VAR	Varicella (chickenpox)	1 <sup>st</sup> dose (12 M)	1 dose required for Preschool (19M - <4Y)
							2 <sup>nd</sup> dose (15 M)	2 doses required for Kindergarten – 12 <sup>th</sup> Grade

