

IMMUNOBIOLOGICS

IMMUNOBIOLOGIC	PRIMARY IMMUNIZATION SCHEDULE	BOOSTER SCHEDULE	COMMENTS AND CONTRAINDICATIONS
<p>Measles, Mumps, Rubella and Varicella Virus Vaccine Live (MMRV)</p> <p>ProQuad® Merck</p>	<p>Children 12 months to 12 years:</p> <p>Dose 1: 0.5 mL SC*</p> <p>Dose 2: 0.5 mL SC* at 4-6 years of age, or at least 3 months after the first dose**</p> <p>* To reconstitute the vaccine: Withdraw the entire contents of the diluent vial into a syringe. Inject all of the diluent in the syringe into the vial of lyophilized vaccine and gently agitate to mix thoroughly. Withdraw the entire contents into a syringe and inject the total volume of reconstituted vaccine subcutaneously (SC).</p> <p>** If the second dose of varicella-containing vaccine is inadvertently administered at least 28 days following the first dose, the second dose does not need to be repeated.</p>	<p>None</p>	<p>ACIP does not prefer the use of MMRV to the separate administration of MMR and varicella vaccines. At least one month should elapse between a dose of measles-containing vaccine (e.g., MMR) and a dose of MMRV vaccine. For children aged <13 years at least 3 months should elapse between two doses of varicella-containing vaccine.</p> <p>If TB skin testing is to be done, administer it before, simultaneously, or at least 4 weeks after MMRV.</p> <p>If a vaccinated person develops a rash, close contact with persons who do not have evidence of varicella immunity and who are at high risk of complications of varicella should be avoided until the rash has resolved.</p> <p>Adverse Reactions: Fever (21.5%), injection site pain, varicella-like rash at injection site, measles-like rash (3.0%) or varicella-like rash (4%-6%), rarely thrombocytopenia associated with MMR, lymphadenopathy sometimes reported after MMR or other rubella-containing vaccine, temporary pain and stiffness in the joints following receipt of MMR or other rubella-containing vaccine, rarely parotitis reported following MMR or other mumps-containing vaccine, zoster caused by varicella vaccine virus has been reported. Note: The first dose of MMRV vaccine has been associated with rash and higher rates of fever than MMR and varicella vaccines given separately. Rash has been reported in about 1 person in 20 and fever in about 1 person in 5. Seizures caused by a fever are also reported more often after MMRV. These usually occur 5-12 days after the first dose.</p> <p>Precautions:</p> <ul style="list-style-type: none"> • Moderate or severe acute illnesses until the condition has improved • Do not administer for 3-11 months after receipt of antibody containing blood products (see table 2, page 5) • History of thrombocytopenia • Tuberculosis patients with active untreated disease should initiate treatment before receiving MMRV • Avoid salicylates for 6 wks post vaccination due to the association between wild varicella zoster infection, salicylates, and Reye syndrome <p>Contraindications:</p> <ul style="list-style-type: none"> • History of anaphylactic reaction to a prior dose of a measles, mumps, rubella, or varicella-containing vaccine, or to any component of the vaccine, including gelatin and neomycin • Altered immune status due to: malignant condition (blood dyscrasia, leukemia*, lymphoma, or other neoplasms affecting the bone marrow or lymphatic system); cellular immunodeficiency; family history of congenital or hereditary immunodeficiency, unless immune competence of possible vaccine recipient is demonstrated; and individuals receiving immunosuppressive therapy, including large doses of corticosteroids (i.e., prednisone or equivalent at a dose of > 2 mg/kg of body weight per day or 20 mg/day), HIV infection (Use the component vaccines (MMR and varicella vaccine) if vaccinating qualifying HIV-infected children [not MMRV].) • Pregnancy <p>*If a child with leukemia is in remission and not immunosuppressed, and needs all four components, MMRV may be used.</p>