

Rota Teq® (RV5) & Rotarix® (RV1)

Vaccine	Route and Dosage	Age	Number of Doses & Ages	Max Age for 1 st Dose	Primary Immunization Schedule
Rota Teq® (RV5) (Merck)	Oral (PO) 2mL	6 weeks through 8 months, 0 days**	3 doses 2, 4, and 6 months	14 weeks, 6 days*	1st dose: 2 mL PO for infants aged 6 weeks to 14 weeks/6 days* 2nd dose: 2 mL PO 4-10 weeks later** 3rd dose: 2 mL PO 4-10 weeks later and by age 8 months/0 days**
Rotarix® (RV1) (GlaxoSmithKline)	Oral (PO) 1mL	(maximum age for last dose)	2 doses 2 and 4 months		1st dose: 1 mL PO for infants 6 weeks through 14 weeks/6 days of age* 2nd dose: 1 mL PO 4-10 weeks later and by age 8 months/0 days

Rotavirus Vaccine Recommendations:

*The first dose of either RV1 or RV5 must be administered before the infant is 15 weeks old. Vaccination should not be initiated for infants of aged 15 weeks/0 days or older.

**The minimum interval between doses of rotavirus vaccine is 4 weeks. The maximum age for the last dose is age 8 months/0 days.

- **Administer RV5 at 2, 4, and 6 months of age.**
- **Administer RV1 at 2 and 4 months of age.**
- ACIP recommends that the rotavirus vaccine series be completed with the same product whenever possible. However, vaccination should not be deferred if the product used for previous doses is not available or is unknown. In this situation, the provider should continue or complete the series with the product available.
- If any dose in the series was RV5 or the product is unknown for any dose in the series, a total of three doses of rotavirus vaccine should be given.

Precautions:

- **Altered Immunocompetence:** Practitioners should consider the potential risks and benefits of administering rotavirus vaccine to infants with known or suspected altered immunocompetence; consultation with an immunologist or infectious diseases specialist is advised. Children and adults who are immunocompromised because of congenital immunodeficiency, hematopoietic transplantation, or solid organ transplantation sometimes experience severe, prolonged and even fatal rotavirus gastroenteritis.

Adverse Reactions

- Mild, temporary diarrhea or vomiting within 7 days
- Rarely, intussusception within a week after 1st or 2nd dose

Contraindications

- Severe allergy to latex (RV1).
- Severe allergic reaction (anaphylactic) to a vaccine component or following a prior dose of vaccine.
- Severe combined immunodeficiency.



Precautions (continued):

- **Previous History of Intussusception:** Practitioners should consider the potential risks and benefits of administering rotavirus vaccine to infants with a previous history of intussusception.
- **Moderate to Severe Illness:** As with all other vaccines, the presence of a moderate or severe acute illness with or without fever is a precaution to administration of rotavirus vaccine. Infants with a moderate to severe acute illness should be vaccinated as soon as they have recovered from the acute phase of the illness.

Other Considerations for Rotavirus Immunization:

- Following rotavirus vaccination, parents or caregivers should watch infant for signs and symptoms of intussusception including episodes of stomach pain with severe cramping, vomiting, blood in the stool, or acting weak or very irritable. Contact the child's health care provider *immediately* if any of these signs occur.
- The introduction of rotavirus vaccines has made a tremendous public health impact in reducing the burden of rotavirus disease in the United States and around the world. Rotavirus vaccines are the best way to protect infants from rotavirus disease and its complications. CDC continues to recommend that all infants in the United States receive rotavirus vaccine. The risk-benefit analysis continues to outweigh the risks associated with vaccination, including the small risk of intussusception.
- **Preexisting Chronic Gastrointestinal Disease:** Infants with preexisting gastrointestinal conditions (e.g. congenital malabsorption syndromes, Hirschsprung's disease, short-gut syndrome) who are not undergoing immunosuppressive therapy should benefit from rotavirus vaccine vaccination, and ACIP considers the benefits to outweigh the theoretical risks.
- **Acute Gastroenteritis:** In usual circumstances, rotavirus vaccine should not be administered to infants with acute, moderate to severe gastroenteritis until the condition has improved. However, infants with mild acute gastroenteritis can be vaccinated, particularly if the delay in vaccination might be substantial and might make the child ineligible to receive vaccine (e.g., aged ≥ 15 weeks/0 days before the vaccine series is started).

Vaccine Storage and Handling

- **Rotateq:** store at 35°-46°F (2°-8°C)
- **Rotarix:**
 - ✓ store vaccine vials at 35°- 46°F (2°-8°C); store diluent at room temperature - 68° - 77°F (20° - 25°C)
 - ✓ should be administered within 24 hours of reconstitution; discard reconstituted vaccine if not used within 24 hours
- Both vaccines should be protected from light
- Both vaccines should not be exposed to freezing temperatures - **do not use if exposed to freezing temperatures**

