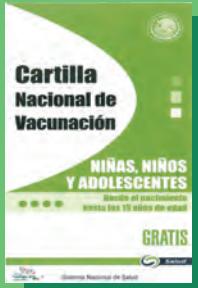


TIPS ON INTERPRETING MEXICO'S NATIONAL IMMUNIZATION RECORD

(Cartilla Nacional de Vacunación)

The Mexican Immunization Record is the official document used nationally to record immunizations provided to children and adolescents in Mexico (birth to 19 years of age) in the public and private sector.

This document also helps inform parents and family members about their children's basic immunizations and the recommended ages for each vaccine.



ABOUT VACCINES AVAILABLE IN MEXICO IN PRIVATE PRACTICE

Although the majority of vaccines included on the Mexican Immunization Record are administered in the public sector, some patients may opt to receive additional shots recommended by their pediatricians (private sector). These vaccines are also recorded in the National Immunization Record in the gray section named "OTRAS" (other vaccines) of the vaccine column.

Listed in the table to the right are some of the vaccines available in the private sector.

SIEMPRE QUE ACUDAS A TU UNIDAD DE SALUD, LLEVA TU CARTILLA NACIONAL Y TAMBIEN LA DE QUIENES TE ACOMPAÑEN				
TAMIZ				
DATOS GENERALES				
PRIMER APELLIDO	_____			
SEGUNDO APELLIDO	_____			
NOMBRES (S)	_____			
CURP	_____			
DOMICILIO	calle y número _____ municipio o delegación _____ entidad federativa _____			
ESTA CARTILLA ES LA HISTORIA DE SU SALUD. CONSERVÁLA				
FECHA DE NACIMIENTO dia _____ mes _____ año _____				
LUGAR DE NACIMIENTO localidad _____ municipio o delegación _____ entidad federativa _____				
FECHA DE REGISTRO dia _____ mes _____ año _____				
LUGAR DE REGISTRO localidad _____ municipio o delegación _____ entidad federativa _____				
FECHA DE REGISTRO dia _____ mes _____ año _____				
CARTILLA NACIONAL DE VACUNACIÓN 2007				
CURP				
NOMBRE COMPLETO		MUJER	HOMBRE	
VACUNA	ENFERMEDAD	DOSIS	EDAD	FECHA DE VACUNACIÓN
BCG	Tuberculosis	Única	Al Nacer	
ANTIEPATITIS B	Hepatitis B	Primera	Al Nacer	
		Segunda	2 meses	
		Tercera	6 meses	
PENTAVALENT ACELULAR DPaT + VIP + Hib	Difteria, Tos Ferina, Tétanos, Poliomielitis E, Infecciones por H Influenza Tipo b	Primera	2 meses	
		Segunda	4 meses	
		Tercera	6 meses	
		Cuarta	18 meses	
OTRAS	ANTINEUMOCOCICA	PRIMERA	23/3/2003 DR. RAMOS	

DEMOGRAPHIC INFORMATION

The first section on the inside of the "cartilla" contains demographic information.

- ▶ Name Section includes "primer y segundo apellido (first and second last name)" or paternal and maternal last names, respectively.
- ▶ "CURP" stands for Unique Code for Peoples Registry (the unique identifying code similar to the Social Security Number).
- ▶ The second half contains "Fecha de Nacimiento" as Date of Birth, "Lugar de Nacimiento" as Place of Birth and Registration Information.
- ▶ The back section contains Height and Weight information.
- ▶ Note: Dates in Mexico are written Day/ Month/ Year. For instance 20/ 1 /2003 = Jan 20, 2003.

BASIC IMMUNIZATION SCHEDULE

The second part of the document contains information on the basic childhood immunization schedule, outlined in 5 columns:

- 1- **Vacuna (Vaccine)**
- 2- **Enfermedad que previene (Preventable Disease)**
- 3- **Dosis (Dose)**
- 4- **Edad (Age)**
- 5- **Fecha de Vacunación (Date of Vaccine Administration)**

- ▶ Dates of vaccine administration may be recorded in pen or stamped.
- ▶ Next due date is always recorded in pencil.
- ▶ Clinic stamp or signature of person administering vaccine & title may be recorded next to the date of vaccination.

PRIVATE SECTOR VACCINES

Vaccines administered in the private sector are recorded in the gray section: OTRAS (other).

MEXICO (PRIVATE SECTOR)			CALIFORNIA	
Preventable Disease	Vaccine	Recommended Schedule	Vaccine	Recommended Schedule
Varicella	Varicela	12-18m	Varicella	12-15m, 4-6yr
Hepatitis A	Hepatitis A*	1 yr, 2nd dose 6m after dose #1	Hepatitis A	1yr, 2nd dose 6m after dose #1
<i>H influenzae</i> type b	Single antigen Hib not used. Only available as part of "Pentavalente" given at 2, 4, 6 and 18 months of age.		Hib	2m, 4m, 6m, 12-15m
Human Papillomavirus	VPH	11-12yrs, 2nd dose 2m after dose #1, Catch-up to 26yrs	HPV	11-12yrs, 2nd dose 2m after dose #1, 3rd dose 6m after #1 Catch-up to 26yrs
Meningococcal	Not Used in Mexico		MCV4	11-12yrs, catch-up to 18 yrs
Pneumococcal	Antineumocócica (23 serotipos)	For children > 2yrs with asplenia, weakened immune system, or chronic conditions	Pneumococcal Polysaccharide PPV	For children > 2yrs with asplenia, weakened immune system, or chronic conditions

*Twinrix (Hep A/B) schedule is 3 doses (0m, 1m, 6m) after 1 year of age (in Mexico).

2007

BINATIONAL IMMUNIZATION GUIDE: INTERPRETING IMMUNIZATION SCHEDULES

México → California

This Guide provides information on Mexico's Immunization Schedule, including number of doses and recommended ages. Mexico's schedule is compared side by-side to the "Recommended Childhood and Adolescent Immunization Schedule" followed by health care providers in CA. The Guide also includes information on vaccines available in Mexico in the public sector (this side) and private sector (back).

The Guide facilitates the interpretation of Mexico's Immunization Record and assists health care providers, school staff, and child care providers in assessing immunization records of binational children.

This document follows the format of the "Cartilla Nacional de Vacunación" or National Immunization Record for children and adolescents up to 19 yrs of age.

Produced in collaboration with:



Created by



MEXICO (CARTILLA NACIONAL DE VACUNACIÓN 2007)			CALIFORNIA IMMUNIZATION RECORD PM-286 (I/07)		
VACUNA (VACCINE)	ENFERMEDAD QUE PREVIENE (DISEASE)	EDAD (AGE)	PREVENTABLE DISEASE	VACCINE USED IN CALIFORNIA	AGE
BCG	TUBERCULOSIS	Birth	Tuberculosis	Not Used in California	
ANTIHEPATITIS B (Hep B)	HEPATITIS B	Birth, 2m, 6m	Hepatitis B	Hep B	Birth, 1-2m, 6-18m
PENTAVALENT ACELULAR * DPaT + VIP + Hib (DTaP + IPV + Hib)	DIFTERIA, TOS FERINA, TÉTANOS, POLIOMIELITIS E, INFECCIONES POR H INFLUENZAE TIPO B	2m, 4m, 6m, 18m	Diphtheria, Pertussis, Tetanus, Polio, Hib	DTaP Hib Pediarix DTaP + IPV + Hep B Comvax Hep B + Hib	2m, 4m, 6m, 15-18m 2m, 4m, 6m①,12-15m 2m, 4m, 6m 2m, 4m, 12-15m
DPT (DTP)	DIFTERIA, TOS FERINA, TETANOS	4yrs	Diphtheria Tetanus Pertussis	DTaP (Acellular Pertussis)	4-6yrs
ROTAVIRUS	GASTROENTERITIS CAUSADA POR ROTAVIRUS	2m, 4m	Rotavirus	Rotavirus (RV)	2m, 4m, 6m
NEUMOCÓCCICA CONJUGADA 7 Valente (Pneumococcal)	INFECCIONES POR NEUMOCOCO	2m, 4m, 1yr	Pneumococcal	Pneumococcal PCV	2m, 4m, 6m, 12-15m
ANTIINFLUENZA (Influenza)	INFLUENZA	6m-35m (in October and November) 1m after 1st Annually after 35m (in October and November)	Influenza	INFLUENZA TIV or LAIV ¹ (October-June)	6m-59m 4 wks later in the 1st yr vaccinated Annually up to 59m
TRIPLE VIRAL SRP (MMR)	SARAMPIÓN, RUBÉOLA Y PAROTIDITIS	1yr, 6yrs	Measles, Rubella, Mumps	MMR	12-15m, 4-6yrs
SABIN (OPV)	POLIOMIELITIS	During National Vaccination Weeks 6m to 5yrs	Polio	IPV	4-6yrs
Td	TÉTANOS, DIFTERIA	After 12yrs Booster	# Tetanus, Diphtheria, acellular Pertussis	Tdap	11-12yrs, catch up to 18yrs
SR (MR)	SARAMPIÓN, RUBÉOLA	Booster	Measles, Rubella	Not Used in California	
ANTIHEPATITIS B^ (Hep B)	HEPATITIS B	12 yrs, 2nd dose 4m after dose #1	+ Hepatitis B	Hep B^	19m-18yrs, [2 or 3 Doses②]

^ Catch-up

+ Needs Additional Dose

§ Pentavalente = DTaP + IPV + Hib ≠ Pediarix = DTaP + IPV + Hep B

Not Equivalent

② Number of Doses Depends on Vaccine Product

*Pentavalente Given Prior to 2007 contained DTP + Hep B + Hib

Triple Viral SRP = MMR

¹ LAIV is licensed for healthy people 2-49 years