



1.RSV MONOCLONAL ANTIBODY (respiratory syncytial virus) (nirsevimab; Beyfortus®): one dose is recommended for newborns during RSV season (October to March): - Babies born between 1 April and 30 September (before the VRS season) will receive nirsevimab from the last RSV: Monoclonal antibody for respiratory syncytial virus week of September. - Babies born between 1 October and 31 March (during the VRS season) will receive nirsevimab as soon as possible after birth. 2. TETANUS-DIPHTHERIA-PERTUSSIS (Tdap; Boostrix®): one dose during pregnancy from week 27 of gestation, preferably at week 27 Tdap: Tetanus, diphtheria and acellular pertussis (whooping cough) vaccine or 28. 3. TETANUS-DIPHTHERIA-PERTUSSIS-POLIOMYELITIS (DTaP-IPV; Tetraxim®): one dose at age 6 (children born in 2019). Catch-up vaccination for children born from 1 January 2017 who received a 2+1 course (2, 4 and 11 months). Those born before 2017 (who received a 3+1 course at 2, 4, 6 and 18 months) who did not receive a dose of DTaP at age 6 will receive one dose of DTaP vaccine without polio (Boostrix®). 4. TETANUS-DIPHTHERIA-PERTUSSIS (Tdap; Boostrix®): one dose for children aged 14 (born in 2011) who have not received Tdap since the (low dose/adults) DTaP: Tetanus, diphtheria and acellular pertussis (whooping cough) vaccine age of 10. Catch-up vaccination of one dose for 15- to 18-year-olds who have not received TD or Tdap since the age of 10. This measure will be rolled out from 1 March 2025. 5. TETANUS-DIPHTHERIA (TD; Diftavax®): check prior vaccination status before starting or completing a TD (high dose/infants) primary vaccination course in adults. If necessary, a 5-dose course of TD vaccine will be administered. A dose at age 65 is recommended for people who received 5 doses during childhood and adolescence. 6. HEPATITIS B: for babies born to mothers infected with hepatitis B **DT**: Tetanus and diphtheria vaccine (adults) (HBsAg+), the first dose will be administered within 24 hours of birth (preferably 12 hours) in combination with HB immunoglobulin. If the mother's HBsAg status is unknown and if results are not available within 24 hours of birth, the newborn will also receive a dose of the IPV: Inactivated polio virus vaccine hepatitis B vaccine. All babies will then follow the standard hexavalent vaccine schedule, with doses at 2,4 and 11 months of age. 7. HEPATITIS B: a 3-dose course (0, 1 and 6 months) will be administered for people up to 18 years of age who have not previously been vaccinated. 8. HB: Hepatitis B vaccine ROTAVIRUS (pending designation of commercial product): to start in the second half of 2025. The start date for primary vaccination will be announced at a later date. Schedule pending final selection of the product. 9. 20-VALENT PNEUMOCOCCAL CONJUGATE VACCINE (PCV20; Hib: Haemophilus influenzae type b (Hib) vaccine Prevenar 20[®]): one dose for all people born between 1 January 1949 and 31 December 1965 who have not previously received PCV13, PCV15 or PCV20. Vaccination for the new cohorts (1949, 1950, 1965) will begin on 1 March 2025. 10. MENINGOCOCCAL B (MenB; Bexsero®): for children born from 1 October 2021. 11. MENINGOCOCCAL GROUP A, C, W and Y (MenACWY; Nimenrix®): one dose at 4 months. 12. MENINGOCOCCAL GROUP A, C, W and Y (MenACWY; MenQuadfi®): one dose at 12 months. 13. MENINGOCOCCAL GROUP A, C, W and Y (MenACWY; MenQuadfi®): one dose at 12 months. RV: Rotavirus vaccine PCV20: 20-valent pneumococcal conjugate vaccine one dose for adolescents aged 12 years (born in 2013) and a catch-up vaccination for 13- to 18- year-olds who have not received at least one dose of MenACWY (Nimenrix®, MenQuadfi® or Menveo®) since age 10. 14. MMR (measles, mumps and rubella) (MMR; M-R-V-VaxPro®): a catch-up vaccination is recommended for people under 65 years of age (preferably those born after 1978) with no vaccination record nor history of measles. 2 doses will be administered with a minimum of 4 weeks between doses. Not advised for pregnant women and immunosuppressed people. 15. VARICELLA (VVZ; Varivax®): catch-up vaccination or history of varicella (chicken pox). Scheduled catch-up strategy for 12-year-olds. 2 doses will be administered with a MenB: Serogroup B meningococcal vaccine MenACWY: Meningococcal conjugate vaccine (serogroups A, C, W and Y) MMR: Measles, mumps and rubella vaccine minimum of 4 weeks (preferably 8) between doses. Adults with no history of disease or record of vaccination will be given a blood test for varicella (IgC antibodies). Not advised for pregnant women and immunosuppressed people. 16. HUMAN PAPILLOMAVIRUS (HPV; GARDASIL 98): one dose for 12-year-old boys and girls (born in 2013) and one catch-up dose for girls and boys aged 13 to 18 who have never received a dose of any HPV vaccine (Cervarix®, Gardasil 98). 17. FLU: one dose is recommended at any stage of pregnancy or during the first VZV: Varicella zoster virus vaccine 6 months of the postpartum period, during the annual flu programme. 18. Annual FLU: one dose is recommended for everyone 60 years of age or older during the HPV: Human papillomavirus vaccine annual flu programme. 20. COVID-19: one dose is recommended at any stage of pregnancy or during the first 6 months of the postpartum period. 21. Annual COVID-19: one dose is recommended for everyone 60 years of age or older. 22. HERPES ZOSTER (HZ; Shingrix®): a 2-dose HZ: Herpes zoster vaccine course, with a minimum of 2 months between doses, is recommended for all 65-year-olds (born in 1960). Catch-up vaccination for unvaccinated people born in 1959. Vaccination for the 1960 cohort will begin on 1 March 2025.

