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> Status as of April 3, 2020



World Immunization Chart

Required and recommended immunizations for all countries, and specific immunizations for select travellers and persons on work assignments.

2020 Edition

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Afghanistan	PO3, V2: RI, HA12, TF10
	SV: HB13, RA15
Albania	Υ6γ, V2: RI, HA12
	SV: HB13, RA15, TBE18
Algeria	Υ6γ, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
American Samoa	RI50, V2: HA12
	SV: HB13, TF9
Andorra	V1: RI
Angola	Υ5 β, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Anguilla	V1: RI, HA12
	SV:TF9
Antigua and Barbuda	Υ6 γ, V2: RI, HA12
	SV:TF9
Argentina	Y23, V1: RI, HA12
	SV: RA15, TF9
Armenia	V1: RI, HA12
	SV: HB13, RA15, TF9
Aruba, Bonaire,	Υ6 β, 8, V2: RI, HA12
Curaçao	SV:TF9
Australia	Υ6γ, 8, 30, V2: RI
	SV: HB14, JE17
Austria	V1: RI
	SV:TBE18
Azerbaijan	V1: RI, HA12
	SV: HB13, RA15, TF9
Azores	V1: RI
Bahamas	Υ6γ, 8, V2: RI, HA12
Bahrain	Υ6 β, 8, V2: RI, HA12
	SV: HB13, RA15
Bangladesh	Υ6γ, 7, V2: RI, HA12, TF10
	SV: C11, HB13, JE17, RA15
Barbados	Υ6 γ, 41, V2: RI, HA12
	SV:TF9
Belarus	V1: RI, HA12
	SV: HB13, TBE18, RA15
Belgium	V1: RI
Belize	Υ6γ, 7, PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Benin	Y6γ, 7, 28, V2: RI, PO4, HA12,
	M16
	SV: HB13, RA15, TF9

Bermuda	V1: RI
Bhutan	V1: RI, HA12, TF10
	SV: HB13, JE17, RA15
Bolivia	Υ6γ, 37, V2: RI, HA12
	SV: HB13, RA15, TF9
Bosnia and	V1: RI, HA12
Herzegovina	SV: HB13, RA15, TBE18
Botswana	Υ6 γ, 7, V2: RI, HA12
	SV: HB13, RA15, TF9
Brazil	Y34, V1: RI, HA12
	SV: HB13, RA15, TF9
Brunei Darussalam	Y6β, 8, PO3, V2: RI, HA12, TF10
	SV: HB13, JE17, RA15
Bulgaria	V1: RI, HA12
	SV: HB13, RA15
Burkina Faso	Υ6β, 7, 28, V2: RI, PO4, HA12,
	M16
	SV: HB13, RA15, TF9
Burundi	Υ6 β, 7, 28, V2: RI, HA12
	SV: HB13, RA15, TF9
Cabo Verde	Υ6γ, 8, V2: RI, HA12
	SV: HB13, TF9
Cambodia	Y6γ, 8, V2: RI, HA12, TF10
	SV: HB13, JE17, RA15
Cameroon	Υ5 β, V2: RI, PO4, HA12, M16
	SV: C11, HB13, RA15, TF9
Canada	V1: RI
	SV: HB14
Canary Islands	V1: RI
Cayman Islands	V1: RI, HA12
	SV:TF9
Central African	Υ5 β, V2: RI, PO4, HA12, M16
Republic	SV: HB13, RA15, TF9
Chad	Υ5 β, V2: RI, PO4, HA12, M16
	SV: HB13, RA15, TF9
Chile	V1: RI, HA12
China Mainland	SV:TF9
China – Mainland	Υ6 β, 7 , V2: RI, PO4, HA12
Hong Kong	SV: HB13, JE17, RA15, TBE18, TF9
– Hong Kong	V1: RI, HA12 SV: HB13, TF9
– Macao	V1: RI, HA12
- wacao	SV: HB13, RA15, TF9
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Christmas Island	Υ6γ, 8, 30, V2: RI, HA12
	SV:TF9
Colombia	Y35, V2: RI, HA12
	SV: HB13, RA15, TF9
Comoros	V1: RI, HA12
	SV: HB13, RA15, TF9
Congo – Republic	Υ5 β, V2: RI, HA12
	SV: HB13, RA15, TF9
Congo – Dem. Rep.	$\textbf{Y5}{\beta}, \textbf{V2: RI, PO4, HA12, M16}$
	SV: C11, HB13, RA15, TF9
Cook Islands	V1: RI, HA12
	SV: HB13, TF9
Costa Rica	Υ6 β, 38, V2: RI, HA12
	SV: HB13, RA15, TF9
Côte d'Ivoire	$\textbf{Y5}{\beta}, \textbf{V2: RI, PO4, HA12, M16}$
	SV: HB13, RA15, TF9
Croatia	V1: RI, HA12
	SV:TBE18, RA15
Cuba	Y6β, 8, V2: RI, HA12
	SV: RA15, TF9
Cyprus	V1: RI
Czech Republic	V1: RI, HA12
Czechia	SV:TBE18
Denmark	V1: RI
	SV:TBE18
Djibouti	V1: RI, HA12
	SV: HB13, RA15, TF9
Dominica	Υ6γ, 8, V2: RI, HA12
	SV:TF9
Dominican Republic	Y24, V2: RI, HA12
	SV: HB13, RA15, TF9
Ecuador	Y21, V2: RI, HA12
	SV: HB13, RA15, TF9
Egypt	Y6β, 8, 31, PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
El Salvador	Υ6γ, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
Equatorial Guinea	Υ6 β, 28, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Eritrea	Y6β, 8, 42, V2: RI, HA12, M16
	SV: HB13, RA15, TF9
Estonia	V1: RI, HA12
	SV:TBE18, RA15
	- / -

IAMAT | World Immunication Chart | April 2020

IMMUNIZATION CODES

- C Cholera
- HA Hepatitis A (see description on p4)
- HB Hepatitis B (see description on p4)
- JE Japanese Encephalitis
- M Meningococcal Meningitis
- **PO** Polio (see description on p4)
- **RA** Rabies
- **RI** Routine Immunizations (see description on p4)
- SV Selective vaccination(s). These apply only to select travellers or persons on work assignments.
- **TBE** Tick-borne Encephalitis

Eswatini | Swaziland Y6_β, 7, V2: RI, HA12

SV: HB13, RA15, TF9

TF Typhoid Fever

V Vaccination(s)

Y Yellow Fever - As of July 2016, existing and new Yellow Fever vaccination certificates are valid for life. Proof of re-vaccination or a booster dose is no longer required. A vaccination waiver can be issued by your medical practitioner if the Yellow Fever vaccine is contraindicated for medical reasons. If you cannot be vaccinated, take meticulous anti-mosquito bite measures during the daytime in Yellow Fever risk areas. Note: Countries may change their vaccination requirements without notice or not honour vaccination waivers. In some instances, border agents use their discretion to deny entry despite officially stated requirements. If there is risk of Yellow Fever at your destination, you may be required to provide proof of vaccination or a vaccination waiver, irrespective of a country's stated entry requirements.

Guinea-Bissau	Υ5 γ , 28, V2: RI, HA12, M16 SV: HB13, RA15,TF9
Guyana	Υ6 γ, 7, 28, V2: RI, HA12 SV: HB13, RA15,TF9
Haiti	Υ6 γ, V2: RI, HA12, TF10
	SV: C11, HB13, RA15
Honduras	Υ6 γ , V2: RI, HA12 SV: HB13, RA15,TF9
Hungary	V1: RI, HA12
nungary	SV: TBE18
Iceland	V1: RI
India	Υ6β, 40, PO3, V2: RI, HA12,
india	TF10
	SV: C11, HB13, JE17, RA15
Indonesia	Y6β, V2: RI, PO4, HA12, TF10
	SV: HB13, JE17, RA15
Iran	Υ6 β, 8, PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Iraq	Y6β, 8, PO3, V2: RI, HA12,
	TF10
	SV: HB13, RA15
Ireland	V1: RI
Israel	V1: RI
	SV: HB13, RA15
Italy	V1: RI
	SV:TBE18
Jamaica	Υ6γ, 8, V2: RI, HA12
	SV:TF9
Japan	V1: RI
	SV: HB13, JE17, TBE18
Jordan	Υ6γ, 8, PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Kazakhstan	V1: RI, HA12
	SV: HB13, RA15, TBE18, TF9
Kenya	Υ6γ, 8, 44, V2: RI, PO4, HA12,
	M16
	SV: C11, HB13, RA15, TF9
Kiribati	V1: RI, HA12
	SV: HB13, TF9
Korea – North	Υ6 γ, V2: RI, HA12, TF10
	SV: HB13, JE17, RA15

IAMAT | World Immunication Chart | April 2020

- $\alpha~$ A vaccination certificate is required for children 6 months of age and older. \dagger
- $\beta~$ A vaccination certificate is required for children 9 months of age and older.
- γ A vaccination certificate is required for children 1 year of age and older.
- $\delta~$ A vaccination certificate is required for children of all ages. $\dagger~$

† Yellow Fever vaccination is not recommended for children under 9 months of age. If travel is unavoidable and the child's physician considers vaccination unwise, ask for a letter on the physician's own stationery explaining the reason for not vaccinating the child. Note that some countries may not honour this and the infant may be put under surveillance upon arrival.

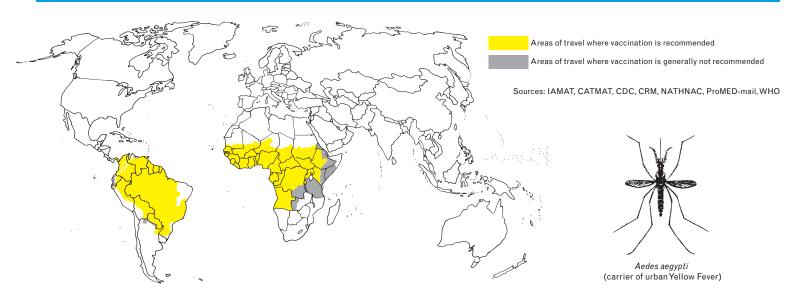
Korea – South	V1: RI, HA12
	SV: HB13, JE17, RA15, TBE18,
	TF9
Kuwait	V1: RI, HA12
	SV: HB13
Kyrgyzstan	Υ6γ, 8, V2: RI, HA12
	SV: HB13, RA15, TBE18, TF9
Laos	Y6ծ, V2: RI, PO4, HA12, TF10
	SV: HB13, JE17, RA15
Latvia	V1: RI, HA12
	SV:TBE18, RA15
Lebanon	PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Lesotho	Υ6α, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
Liberia	Υ6β, 28, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Libya	Υ6γ, PO3, M49, V2: RI, HA12
	SV: HB13, RA15, TF9
Liechtenstein	V1: RI
	SV:TBE18
Lithuania	V1: RI, HA12
	SV:TBE18, RA15
Luxembourg	V1: RI
Madagascar	Υ6 β, 8, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Madeira Islands	V1: RI
Malawi	Υ6γ, 8, V2: RI, HA12
	SV: C11, HB13, RA15, TF9
Malaysia	Υ6γ, 8, V2: RI, PO4, HA12,
	TF10
	SV: HB13, JE17, RA15
Maldives	Υ6β, 8, PO3, V2: RI, HA12,
Mali	
Marshall Islands	
Martinique	Υ 6γ, 8, V 2: RI , HA 12
	SV:TF9
Madagascar Madeira Islands Malawi Malaysia Maldives Malta Marshall Islands	Y6β, 8, V2: RI, PO4, HA12 SV: HB13, RA15, TF9 V1: RI Y6γ, 8, V2: RI, HA12 SV: C11, HB13, RA15, TF9 Y6γ, 8, V2: RI, PO4, HA12, TF10 SV: HB13, JE17, RA15 Y6β, 8, PO3, V2: RI, HA12, TF10 Y5γ, 22, V2: RI, HA12, M16 SV: HB13, RA15, TF9 Y6β, 8, 25, V2: RI RI50, V2: HA12 SV: HB13, TF9

	5V: HD13, KA13, 1F9
Ethiopia	Υ6 β, 8 , 43 , V2 : RI , PO4 , HA12 ,
	M16
	SV: C11, HB13, RA15, TF9
Falkland Islands	V1: RI
Faroe Islands	V1: RI
Fiji	Υ6γ, 8, V2: RI, HA12
	SV: HB13, TF9
Finland	V1: RI
	SV: HB14, TBE18
France	V1: RI
	SV:TBE18
French Guiana	Υ6γ, 28, V2: RI, HA12
	SV: HB13, RA15, TF9
French Polynesia	Υ6γ, 8, V2: RI, HA12
	SV: HB13, TF9
Gabon	Υ5γ, 28, V2: RI, HA12
	SV: HB13, RA15, TF9
Gambia	Υ6β, 28, M49, V2: RI, HA12
	SV: HB13, RA15, TF9
Georgia	PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Germany	V1: RI
	SV:TBE18
Ghana	Υ5β, V2: RI, HA12, M16
	SV: HB13, RA15, TF9
Gibraltar	V1: RI
Greece	V1: RI
Greenland	V1: RI
	SV: HB14, RA15
Grenada	Υ6γ, 8, V2: RI, HA12
	SV: RA15, TF9
Guadeloupe	Υ6 γ, 8, V2: RI, HA12
	SV:TF9
Guam	V1: RI, HA12
	SV: HB13, TF9
Guatemala	Υ6 γ, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
Guinea	Υ6 β, 28, V2: RI, PO4, HA12 ,
	M16

SV: HB13, RA15, TF9

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YELLOW FEVER MAP



Mauritania	Υ6γ, 22, V2: RI, HA12, M16
	SV: HB13, RA15, TF9
Mauritius	V1: RI, HA12
	SV:TF9
Mayotte	Υ6γ, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
Mexico	V1: RI, HA12
	SV: HB13, RA15, TF9
Micronesia,	V1: RI, HA12
Federated States	SV:TF9
Moldova	V1: RI, HA12
	SV: HB13, RA15
Monaco	V1: RI
Mongolia	V1: RI, HA12
	SV: HB13, RA15, TBE18, TF9
Montenegro	V1: RI
	SV: RA15
Montserrat	Υ6γ, 7, V2: RI, HA12
	SV:TF9
Morocco	PO3, V2: RI, HA12
	SV: HB13, RA15, TF9
Mozambique	Υ6β, 8, V2: RI, PO4, HA12
	SV: C11, HB13, RA15, TF9
Myanmar Burma	Υ6γ, 8, V2: RI, PO4, HA12,
	TF10
	SV: HB13, JE17, RA15
Namibia	Υ6 β, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
Nauru	V1: RI, HA12
	SV: HB13, TF9
Nepal	Υ6γ, 8, PO3, V2: RI, HA12,
	TF10
	SV: HB13, JE17, RA15
Netherlands	V1: RI
	SV:TBE18
New Caledonia	Υ6 γ, 8 , V2: RI, HA12
	SV: HB13, TF9
New Zealand	V1: RI
	SV: HB14
Nicaragua	Υ6 γ, V2: RI, HA12
	SV: HB13, RA15, TF9

Niger	Υ5 γ, 22, V2: RI, PO4, HA12, M16 SV: HB13, RA15, TF9
Nigeria	Υ5 β, V2: RI, PO4, HA12, M16 SV: C11, HB13, RA15, TF9
Niue	Υ6 β, V2: RI, HA12 SV: HB13, TF9
North Macedonia	V1: RI, HA12 SV: RA15
Northern Mariana Islands	V1: RI, HA12 SV: HB13, TF9
Norway	V1: RI SV: HB14, TBE18
Oman	Υ6 β , 8, ΡΟ3, V2: RI, ΗΑ12 SV: HB13, RA15
Pakistan	Υ6 γ , ΡΟ3, V2: RI, HA12, TF10 SV: HB13, JE17, RA15
Palau	V1: RI, HA12 SV: HB13, TF9
Palestine	V1: RI, HA12 SV: RA15, TF9
Panama	Υ6 γ , 8, 33, V2: RI, HA12 SV: HB13, RA15,TF9
Papua New Guinea	Υ6 γ , 7, V2: RI, HA12 SV: HB13, JE17,TF9
Paraguay	Υ6 γ , 29, V2: RI, HA12 SV: RA15, TF9
Peru	Y26, V1: RI, HA12 SV: HB13, RA15,TF9
Philippines	Υ6 γ, 8, V2: RI, PO4, HA12, TF10 SV: HB13, JE17, RA15
Pitcairn Islands	Υ6 γ, V2: RI, HA12 SV:TF9
Poland	V1: RI SV: RA15, TBE18
Portugal	V1: RI
Puerto Rico	V1: RI, HA12

Qatar	PO3, V2: RI, HA12 SV: HB13
Réunion	V1: RI, HA12
Roumon	SV: HB13, TF9
Romania	V1: RI, HA12
Komama	SV: HB13, TBE18, RA15
Russia	V1: RI, HA12
Russia	SV: HB13, JE17, TBE18, RA15
Rwanda	Υ _{6γ} , 27, V2: RI, HA12
	SV: HB13, RA15, TF9
Saba and	Υ6α, 48, V2: RI, HA12
Sint Eustatius	SV:TF9
Saint Barthélemy	Υ6 γ, 8, V2: RI, HA12
-	SV:TF9
Saint Helena	Υ6 γ, V2: RI, HA12
	SV:TF9
Ascension	V1: RI, HA12
	SV:TF9
Tristan da Cunha	V1: RI, HA12
	SV:TF9
St. Kitts and Nevis	Υ6γ, PO3, V2: RI, HA12
	SV:TF9
Saint Lucia	Υ6 β, V2: RI, HA12
	SV:TF9
Saint Martin	Υ6 γ, 8, V2: RI, HA12
	SV:TF9
Saint Pierre	V1: RI
and Miquelon	
Saint Vincent and	Υ6 γ, V2: RI, HA12
the Grenadines	SV:TF9
Samoa	Υ6γ, 8, V2: RI, HA12
	SV: HB13, TF9
San Marino	V1: RI
São Tomé and	Υ6γ, 7, V2: RI, HA12
Príncipe	SV: HB13, TF9
Saudi Arabia	Y6γ, 8, M20, PO19, V2: RI,
	HA12
	SV: HB13, RA15
Senegal	Υ6β, 7, 28, V2: RI, HA12, M16
	SV: HB13, RA15, TF9

ROUTINE IMMUNIZATIONS

HEPATITIS A: If this vaccination was not part of your HEPATITIS A: If this vaccination was not part of your childhood immunization schedule, it is recommended for all travellers 6 months of age and older. This viral infection occurs worldwide and is transmitted through contaminated food and water. This vaccine is often combined with Hepatitis B and provides long term protection for both viral diseases. An HAV antibody test may be advised for persons over 40 or those born in developing countries to determine immunity. Immune globulin may be recommended for some last-minute travellers.

HEPATITIS B: Vaccination is now given routinely as a childhood vaccination. The virus is transmitted through infected blood products, sexual contact, or infected items such as needles or razor blades. Vaccination is recommended for persons on work assignments in the healthcare field (dentists, physicians, nurses, laboratory technicians), for those working in close contact with the local population (teachers, aid workers, missionaries), or for travellers having sexual contact with locals. This vaccine is often combined with Hepatitis A and provides long term protection for both viral diseases.

INFLUENZA: Vaccination is recommended for all travellers over 6 months of age, especially children, pregnant women, persons over 65 and those with chronic health conditions such as asthma, diabetes, lung disease, heart disease, immune-suppressive disorders, and organ transplant recipients. Influenza viruses typically circulate from November to April in the northern hemisphere, from May to October in the southern hemisphere, and year-round in the tropics. If the flu vaccine is not available at the time of departure, contact your healthcare provider regarding influenza anti-viral protection.

Serbia	V1: RI
	SV: HB13, RA15
Seychelles	Υ6γ, 8, PO3, V2: RI, HA12
	SV: HB13, TF9
Sierra Leone	Y5∂, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Singapore	Υ6γ, 8, V2: RI, HA12
	SV: HB13, JE17, TF9
Sint Maarten	Υ6 β, V2: RI, HA12
	SV:TF9
Slovakia	V1: RI
	SV: TBE18
Slovenia	V1: RI
	SV: TBE18
Solomon Islands	Υ6 β, RI50, V2: HA12
	SV: HB13, TF9
Somalia	Υ6 β, 8, 45, V2: RI, PO4, HA12
	SV: C11, HB13, RA15, TF9
South Africa	Υ6γ, 8, V2: RI, HA12
	SV: HB13, RA15, TF9
South Sudan	Υ 5β, V2: RI, PO4, HA12, M16
	SV: HB13, RA15, TF9
Spain	V1: RI
Sri Lanka	Υ6 β, 8, V2: RI, HA12, TF10
	SV: HB13, JE17, RA15
Sudan	Y6γ, 8, 47, V2: RI, HA12, M16
ouduit	SV: C11, HB13, RA15, TF9
Suriname	Y6γ, 8, 32, V2: RI, HA12
Cumuno	SV: HB13, RA15, TF9
Sweden	V1: RI
Gireach	SV: HB14, TBE18
Switzerland	V1: RI
Switzenand	SV:TBE18
Syria	PO3, V2: RI, HA12, TF10
Syria	SV: HB13, RA15
Tojwon	
Taiwan	V1: RI, HA12 SV: HB13, JE17, RA15
Taiikiatan	
Tajikistan	V1: RI, HA12
	SV: HB13, RA15, TF9

POLIO: Adults who have been fully vaccinated as children should receive a Polio booster once only. A primary vaccination series is necessary for those not previously or only partially vaccinated. Polio is endemic in Afghanistan, Pakistan, and Nigeria. Some countries in Africa, the Middle East, and Central Asia are also at risk to the re-introduction of Polio due to low vaccination rates. For a complete list of Polio-affected countries, see Global Polio Fradication Initiative. Global Polio Eradication Initiative.

MEASLES, MUMPS, RUBELLA: Travellers of all ages should ensure that they are up-to-date. All three viruses are highly contagious and tend to spread in places of mass gatherings, including sports events and university campuses. Many countries are seeing a resurgence as a result of lower herd immunity levels due to lack of or under vaccination.

to lack of or under vaccination. Adults born before 1957 (USA) and 1970 (Canada) are generally considered to be immune to Measles and Mumps as a result of previous illness or having had a clinically asymptomatic infection when the virus circulated freely before the vaccine was introduced. Women of childbearing age should ensure that they are immune to Rubella, but are advised not to get pregnant for 4 weeks following vaccination. 4 weeks following vaccination.

TETANUS-DIPHTHERIA and PERTUSSIS:

Travellers of all ages should ensure that they are up-to-date. A single injection booster containing Tetanus-Diphtheria toxoids is recommended for adults every 10 years, regardless if travelling or not. A primary series (which also protects against Pertussis – Tdap) is recommended for previously unvaccinated adults.

PNEUMOCOCCAL: Vaccination is recommended for persons over 65, smokers, or those with chronic health conditions such as emphysema, asthma, lung disease, heart disease, renal disorders, immune-suppressive disorders, and organ transplant recipients, including cochlear implants. Pneumonia and ear infections can be more severe for these travellers.

HERPES ZOSTER: Vaccination is recommended PHENES 205 TER: Vaccination is recommended for persons 60 years and older to protect against the varicella-zoster virus (shingles) and its complications. This vaccine can be given to people who have had shingles and varicella (chickenpox) in the past. It can also be given to those who have never had chickenpox. There is currently no information available if booster doses are needed.

CHILDREN AND YOUTH: Follow the recommended age-appropriate immunization schedule for Diphtheria, Tetanus, Pertussis, Polio, Measles, Mumps, Rubella, Haemophilus B, Meningitis, Pneumococcal, Varicella, Rotavirus, Hepatitis A and B, and Human Papillomavirus.

Tanzania	Υ6γ, 8, 27, V2: RI, HA12
	SV: HB13, RA15, TF9
Thailand	Y6γ, 8, V2: RI, HA12, TF10
	SV: HB13, JE17, RA15
Timor-Leste	V1: RI, HA12, TF10
	SV: HB13, JE17, RA15
Togo	Υ5 β, V2: RI, PO4, HA12, M16
	SV: HB13, RA15, TF9
Tokelau	RI50, V2: HA12
	SV: HB13, TF9
Tonga	V1: RI, HA12
	SV: HB13, TF9
Trinidad and Tobago	Υ6γ, 8, 39, V2: RI, HA12
-	SV:TF9
Tunisia	V1: RI, HA12
	SV: HB13, RA15, TF9
Turkey	V1: RI, HA12
-	SV: RA15, TF9
Turkmenistan	V1: RI, HA12
	SV: HB13, RA15, TF9
Turks and Caicos	V1: RI
Tuvalu	V1: RI, HA12
	SV: HB13, TF9
Uganda	Y5γ, 28, V2: RI, HA12, M16
	SV: HB13, RA15, TF9
Ukraine	V1: RI, PO4, HA12
	SV: HB13, RA15
United Arab	Υ6 β, 8, V2: RI, HA12
Emirates	SV: HB13
United Kingdom	V1: RI
United States	V1: RI
of America	SV: HB14
	V1: RI, HA12
of America Uruguay	
	V1: RI, HA12 SV: RA15, TF9
Uruguay	V1: RI, HA12
Uruguay	V1: RI, HA12 SV: RA15, TF9 V1: RI, HA12 SV: HB13, RA15, TF9
Uruguay Uzbekistan	V1: RI, HA12 SV: RA15, TF9 V1: RI, HA12

Venezuela	Y36, V2: RI, HA12
	SV: HB14, RA15, TF9
Vietnam	V1: RI, HA12, TF10
	SV: HB13, JE17, RA15
Virgin Islands – UK	V1: RI, HA12
	SV:TF9
Virgin Islands – USA	V1: RI, HA12
	SV:TF9
Wake Island	V1: RI, HA12
	SV:TF9
Wallis and Futuna	Υ6γ, 8, V2: RI, HA12
	SV:TF9
Western Sahara	V1: RI, HA12
	SV: HB13, RA15, TF9
Yemen	V1: RI, HA12, TF10
	SV: C11, HB13, RA15
Zambia	Y6γ, 8, 46, V2: RI, PO4, HA12
	SV: HB13, RA15, TF9
Zimbabwe	Υ6 β, 8, V2: RI, HA12
	SV: HB13, RA15, TF9

Your trip is a good reminder to keep your routine immunizations updated. The vaccinations outlined here are recommended for your protection and to prevent the spread of infectious diseases.

The recommendations for immunizations outlined here are intended as guidelines only and may differ according to where you live, your health status, age, destination, trip itinerary, type of travel, and length of stay. Seek further advice from your physician or travel health clinic.

1 No vaccinations are required to enter this country. Vaccinations listed for this country are recommended for your protection.

2 In addition to the required vaccinations, the vaccinations listed for this country are recommended for your protection.

3 A Polio booster is required upon entry for certain travellers. See <u>www.iamat.org</u> for country-specific information. Where vaccination is required, you must present a valid International Vaccination Certificate proving you were vaccinated with Oral Polio Vaccine or Inactivated Polio Vaccine between 4 weeks and 12 months prior to entry. In the absence of proof, vaccination may be administered upon arrival.

4 Due to the risk of Polio virus transmission in this country, all travellers should ensure they have been fully vaccinated against Polio. All residents and long-term visitors (4 weeks or more) of countries with risk of Police virus transmission should receive a booster dose between 4 weeks and 12 months prior to international travel. For a complete list of Polioaffected countries, see Global Polio Eradication Initiative

5 A vaccination certificate is required on arrival from all travellers.

6 A vaccination certificate is required only from travellers coming from a country with risk of Yellow Fever transmission.

The vaccination requirement is imposed by this country for protection against the introduction of Yellow Fever since the main vector Aedes aegypti is present in its territory

The following countries have risk of Yellow Fever

transmission: Africa: Angola, Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Republic of the Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Liberia, Mali, Mauritania, Niger, Nigeria, Senegal, Sierra Leone, South Sudan, Sudan, Togo, Uganda. Americas: Argentina, Bolivia, Brazil, Colombia,

Ecuador, French Guiana, Guyana, Panama, Paraguay, Peru, Suriname, Trinidad and Tobago, Venezuela.

A Yellow Fever vaccination certificate is also required for travellers in transit through an airport of a country with risk of Yellow Fever transmission.

8 A Yellow Fever vaccination certificate is also required for travellers who are in airport transit for more than 12 hours in a country with risk of Yellow Fever transmission.

9 Typhoid is an acute gastrointestinal infection caused by *Salmonella typhi* bacteria. Vaccination is recommended when going outside the areas usually visited by tourists such as travelling extensively in the interior of the country (e.g. trekkers, hikers), for persons on humanitarian missions or work assignments in remote areas, or travellers going to visit friends and relatives for extended periods of time. It may also be recommended for travellers who use antacid therapy. Avoid potentially contaminated water and food, and practice good hand hygiene.

10 Typhoid is an acute gastrointestinal infection caused by Salmonella typhi bacteria. Due to the increased risk of infection in this country, vaccination is highly recommended for all travellers. Avoid potentially contaminated water and food, and practice good hand hygiene.

1 Cholera is an acute gastrointestinal infection caused by *vibrio cholerae* bacteria. Risk of infection to travellers is low and vaccination is advised only for medical and humanitarian personnel working in endemic areas. The vaccine is not available in the endemic areas. The vaccine is not available in the United States. The best prevention measure is to avoid potentially contaminated water and food, and practice good hand hygiene. **Note:** The World Health Organization announced in 1991 that Cholera vaccination certificates are no longer required by any country or territory.

12 Vaccination against Hepatitis A is recommended for all travellers over one year of age who are nonimmune or have not previously been vaccinated. This food and water-borne virus is present worldwide, but there is increased risk of infection in this country, particularly in areas where good hygiene and sanitation are difficult to maintain.

13 Vaccination against Hepatitis B is recommended for all travellers who have not previously been

vaccinated. Vaccination is highly recommended for those who are travelling to work in the healthcare field, to live or work with the local population (teachers, aid workers, missionaries) or indigenous communities, or have sexual contact with locals.

14 Due to the high rate of Hepatitis B carriers among the indigenous population of this country, vaccination is recommended for persons who have not previously been vaccinated and who intend to live or work in indigenous communities.

15 In this country, where Rabies is a constant threat, pre-exposure vaccination (3 shots) is advised for long-term travellers and persons undertaking outdoor activities such as camping, hiking, eco-tourism, and cave exploring or on work assignments such as veterinarians and wildlife researchers. Although this provides adequate initial protection, a person bitten by a potentially rabid animal will require 2 additional post-exposure inoculations. Children should be cautioned not to pet dogs, cats or other mammals. Any animal bite or scratch must be washed repeatedly with copious amounts of soap and water. Seek medical attention immediately.

16 Vaccination is advised for persons travelling extensively or on work assignments in the Meningitis Belt of Africa's northern Savannah. This semi-arid area extends from the Atlantic Ocean to the Red Sea. Seasonal transmission of this bacterial infection occurs from December to June with March and April being peak months. The following countries are part of the Meningitis

belt: Benin, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Democratic Republic of Congo, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Mali, Mauritania, Niger, Nigeria, Rwanda, Senegal, South Sudan, Sudan, Tanzania, Togo, and Uganda.

17 Vaccination is recommended for persons travelling extensively in rural areas, living and working near rice growing rural and suburban areas, as well as other irrigated land where exposure to Culex mosquitos transmitting this viral illness is high. Children are especially susceptible to the infection.

Australia: Risk is present in the outer Torres Straight Islands and Cape York Peninsula. Transmission occurs from December to May. Bangladesh: Sporadic cases are reported

Bangladesh: Sporadic cases are reported throughout Bangladesh. Transmission occurs from May to October. Bhutan: Possibly endemic in non-mountainous regions. Limited information is available. Brunei Darussalam: Risk is presumed to be present in the entire country. Transmission occurs all year. Limited information is available. Cambedia: Pick is present in the entire country. **Cambodia:** Risk is present in the entire country. Transmission occurs from May to October. China: Cases have been reported from all provinces except Qinghai, Xinjiang, and Xizang (Tibet). Sporadic cases have been reported from the NewTerritories. Risk is highest in southern areas of the country. Transmission occurs from May to September in northern areas and from June to October in southern China.

Guam: The last outbreak in Guam occurred in 1947/48, and in Saipan in 1990. Reintroduction of the virus may occur. Vaccination is not recommended at this time.

India: Risk is present throughout India except in Dadra and Nagar Haveli, Daman and Diu, Gujarat, Himachal Pradesh, Jammu and Kashmir, Lakshadweep, Meghalaya, Punjab, Rajasthan, and Sikkim. In northern India transmission occurs from May to October, and generally all year in

southern India. Indonesia: Risk is present in the entire country. Transmission occurs all year. Children under 15 years of age are at high risk.

Japan: Sporadic cases have been reported. Transmission occurs from July to October. Korea - North: Limited information available. Transmission is believed to occur from May to October.

Korea - South: Sporadic cases have been reported. Transmission occurs from May to October. Laos: Risk is presumed to be present in the entire country. Transmission occurs all year. Limited information is available. Malaysia: Sporadic cases are reported

Malaysia: Sporadic cases are reported throughout the country. Sarawak is endemic. Transmission occurs throughout the year. Myanmar | Burma: Risk is presumed to be present in the entire country. Limited information

is available. Nepal: The infection is endemic in the southern

plains bordering India (Terai Districts). Cases

have also been reported from the highlands, including the Kathmandu Valley. Transmission

Pakistan: Reports suggest that risk is present in the lower Indus valley and the Karachi area. Transmission occurs from June to January. **Papua New Guinea:** Risk is presumed to be present in the entire country. Transmission occurs

all year. Limited information is available. **Philippines:** Risk is present on all islands. Transmission occurs all year.

Russia: Outbreaks occur occasionally in the southeast between the border with China and the Sea of Japan, with prevalence in the area of Vladivostok. The period of transmission is from July to October.

Singapore: Sporadic cases have been reported and transmission occurs all year. Sri Lanka: Risk is present throughout the

country, except in mountain regions. Transmission occurs all year.

Taiwan: Sporadic cases have been reported throughout the country. Transmission occurs from May to October.

Thailand: Risk is present throughout the country. Outbreaks mostly occur in the northern region (Chiang Mai valley) with sporadic cases reported from the areas of Sukhothai, the suburbs of Bangkok and Phitsanulok, as well as from the southern regions of the country. Transmission occurs all year, with seasonal peaks from May to October in northern areas. Timor-Leste: The infection is endemic and

transmission occurs all year. Limited information is available. **Vietnam:** The infection is endemic throughout

the country. Transmission occurs from May to October.

18 Vaccination is recommended for persons for stream involved in recreational activities in parks and forested areas (e.g. camping, hiking, backpacking) or working in agricultural and forestry occupations.

Note: The vaccine is only available in countries where Tick-Borne Encephalitis is endemic. Visit <u>www.iamat.org</u> to check if vaccination is recommended for your destination. Contact IAMAT for vaccine availability at your destination. Take meticulous anti-tick bite measures such as tucking long pants into socks or boots, repellent, and daily checks for ticks. Wear clothing treated with permethrin (available in the USA from Sawyer Products: <u>www.sawyer.com</u>).

19 All travellers arriving from Afghanistan, Democratic Republic of the Congo, Mozambique, Myanmar, Niger, Nigeria, Pakistan, Papua New Guinea, Somalia, Syria, and Yemen are required to show a valid International Vaccination Certificate proving they were vaccinated with Oral Polio Vaccine or Inactivated Polio Vaccine between 4 weeks and 12 months prior to entry. Regardless of immunization status, all travellers from the above countries (with the exception of Democratic Republic of the Congo, Mozambique, and Niger) will be given Oral Polio Vaccine upon arrival

20 Proof of vaccination is required for travellers 2 years of age and older who are Hajj or Umrah pilgrims and seasonal or pilgrimage workers in Hajj or Umrah areas. Vaccination with quadrivalent ACWY (either polysaccharide or conjugate) must be issued not less than 10 days before arrival and not more than 3 years (polysaccharide vaccine) or 5 years (conjugate vaccine) before arrival. The immunization certificate should clearly state if the traveller was vaccinated with the conjugate vaccine for the 5-year validity to apply.

validity to apply. In addition, travellers from Africa's meningitis belt (Benin, Burkina Faso, Cameroon, Chad, Central African Republic, Cote d'Ivoire, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Mali, Niger, Nigeria, Senegal, South Sudan, and Sudan) will be administered vaccination upon arrival.

Vaccination is also recommended for all persons 9 months of age and older travelling extensively or on work assignments and persons participating in Hajj or Umrah or seasonal or pilgrimage work in Hajj and Umrah zones.

21 A certificate is required for travellers 1 year of age and older coming from – or who are in airport transit for more than 12 hours in - Brazil, the Democratic Republic

of the Congo, and Uganda. For your protection, Yellow Fever vaccination is recommended for all persons over 9 months of age travelling at altitudes below 2,300 m / 7,546 ft in the provinces of Esmeraldas, Morona-Santiago, Napo, Orellana, Pastaza, Sucumbios, and Zamora-Chinchipe.

NOTES FOR IMMUNIZATION CODES

Note: Vaccination is not recommended for the rest of the country. Take meticulous anti-mosquito bite measures during the daytime at altitudes below 2,300 m / 7,546 ft. Quito, Guayaquil, and the Galapagos Islands are risk free.

22 For their protection, vaccination is recommended for children over 9 months of age travelling south of the Sahara Desert.

23 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age travelling to the provinces of Misiones and Corrientes. Vaccination is also recommended for Iguazú Falls. Note: Vaccination is not recommended if

travelling to the province of Formosa and to the lowlands of the provinces of Jujuy, Chaco, and Salta. Take meticulous anti-mosquito bite measures during the daytime when visiting these areas. All other areas of Argentina are risk free.

24 A vaccination certificate is only required for travellers 1 year of age and older coming from – or who are in airport transit for more than 12 hours within – the following states of Brazil: Minas Gerais, Espírito Santo, São Paulo, and Rio de Janeiro.

25 If indicated for epidemiological reasons, children under 9 months of age arriving from a country with risk of Yellow Fever may be subject to surveillance or isolation.

26 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age travelling at altitudes below 2300 m / 7,546 ft in all regions of the Amazon Basin (east of the Andes Mountains) and the following regions west of the Andes: Ancash, Apurimac, Ayacucho, Cajamarca, Huancavelica, La Libertad, and Piura.

Note: Vaccination is not recommended if only travelling to the provinces of Lambayeque, Tumbes, western Piura, and the southern half of Cajamarca. Take meticulous anti-mosquito bite measures during the daytime in these areas. All other areas of Peru are risk frée

27 All travellers to this country should take meticulous anti-mosquito bite measures during the daytime.

28 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age since this country is in the Yellow Fever endemic zone.

29 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age, including for travellers going to Iguazú Falls.

Note: Vaccination is not recommended if only travelling to Asunción. Take meticulous anti-mosquito bite measures during the davtime.

30 A certificate is not required for travellers coming from the Galápagos Islands (Ecuador).

31 A vaccination certificate is also required if coming from Eritrea, Rwanda, Somalia, Tanzania, and Zambia.

Note: Travellers who do not have proof of vaccination will be quarantined for up to 6 days.

32 For their protection, vaccination is recommended for children over 9 months of age.

33 A Yellow Fever vaccination certificate is also required for travellers arriving from – or who are in airport transit for more than 12 hours in - a country with an active Yellow Fever outbreak (check

www.iamat.org for relevant countries). For your protection, Yellow Fever vaccination is recommended for all travellers 9 months of age and older going to all mainland areas east of the Canal Zone, including the indigenous regions of Emberá and Guna Yala.

Note: Areas west of the Canal, Panama City, the Canal Zone, the Balboa and San Blas Islands are risk free.

34 For your protection, vaccination is recommended for all travellers 9 months of age and older. Note: There is no risk of Yellow Fever in the

following states: Ceará, Rio Grande do Norte, Paraiba, Pemambuco, Alagoas, and Sergipe.

35 A vaccination certificate is required for travellers 1 year of age and older arriving from – or in transit through an airport for more than 12 hours in – Angola, Brazil, the Democratic Republic of the Congo, and Uganda. Colombia also requires vaccination for all

travellers visiting natural parks and nature and wildlife sanctuaries throughout the country. Travellers should carry proof of vaccination at all times.

For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age travelling in areas below 2,300 m /7,546 ft since most of this country is in the Yellow Fever endemic zone. Travellers visiting the departments of Amazonas, Arauca, Caquetá, Casanare, César, Guainía, Guaviare, La Guajira, Meta, Putumayo, Vaupés, and Vichada, as well as certain regions of Bolívar, Boyacá, Huila, Magdalena, Norte de Santander, and Santander should be prepared to provide proof of vaccination.

Note: Vaccination is not recommended if only travelling to Cartagena, Calí, Medellín, or Barranquilla. Take meticulous anti-mosquito bite measures during the daytime in these cities. Bogotá and the islands of San Andrés y Providencia are risk free.

36 A Yellow Fever vaccination certificate is required for travellers over 1 year of age coming from Brazil and travellers who transited for more than 12 hours through an airport in Brazil.

For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age travelling at altitudes below 2,300 m / 7,546 ft, including Angel Falls.

Note: Vaccination is not recommended if only travelling to the Distrito Federal and the states of Vargas, Miranda, Aragua, Carabobo and Yaracuy. Take meticulous anti-mosquito bite measures during the daytime in these areas. Margarita Island, Caracas, Valencia, and the states of Falcón and Lara are risk free

37 Vaccination is recommended for travellers over 9 months of age travelling at altitudes below 2,300 m / 7,546 ft in the departments of Beni, Santa Cruz, Pando, and the subtropical areas of the departments of La Paz, Cochabamba, Chuquisaca, and Tarija. Note: The city of La Paz and Sucre are risk free.

38 A certificate is also required if coming from

Tanzania or Zambia. Note: A certificate is not required if coming from Argentina, Panama, and the island of Tobago.

A certificate is also not required if coming from the following specific areas: Bogotá, Barranquilla, Cali, Cartagena, Medellín and San Andrés y Providencia (Colombia); Asunción (Paraguay); Lima, Cuzco, Machu Picchu, the Inca Trail, Lambayeque, Tumbes, Piura and Cajamarca (Peru); and Port of Spain (Trinidad). Travellers arriving from Ecuador are

only required to provide a certificate if coming from Morona-Santiago, Napo, Orellana, Pastaza, and Sucumbíos y Zamora-Chinchipe.

39 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age going to forested areas on the island of Trinidad. Note: The island of Tobago is risk free

40 A Yellow Fever vaccination certificate is required on arrival from travellers who arrive within 6 days of departure from an area with risk of Yellow Fever transmission. A vaccination certificate is also required for travellers arriving from Rwanda.

Travellers arriving by ship are required to show a vaccination certificate if they stopped at any port in an area with risk of Yellow Fever transmission 30 days prior to arrival. Travellers who fail to provide proof of vaccination will be quarantined for up to 6 days.

41 A vaccination certificate is not required if arriving from Guyana or the island of Trinidad unless an urban outbreak is occurring.

42 For your protection, all travellers should take meticulous anti-mosquito bite measures during the daytime in the regions of Anseba, Debub (Southern), Gash-Barka, Ma'akel (Central), and Semenawi K'eyih Bahri (Southern Red Sea). Note: Other areas of the country, including the

Dahlak Archipelago are risk free.

43 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age since part of this country is in the Yellow Fever endemic zone. Vaccination is not recommended if only travelling to the provinces of Afar and Somali. Take meticulous anti-mosquito bite measures during the daytime in these areas.

44 For your protection, Yellow Fever vaccination is recommended for all travellers over 9 months of age since part of this country is in the Yellow Fever endemic zone. Vaccination is recommended if going on a safari.

Note: Vaccination is not recommended if only travelling to Nairobi, Mombasa, the province of North Eastern, and the counties of Kwale, Kilifi, Malindi, Tana River, and Lamu in Coast province. Take meticulous anti-mosquito bite measures during the daytime in these areas.

45 For your protection, all travellers should take meticulous anti-mosquito bite measures during the daytime in the regions of Bakool, Banaadir, Bay, Galguduud, Gedo, Hiran, Lower Juba, Middle Juba, Middle Shebelle, and Lower Shebelle. Note: The rest of the country is risk free.

46 For your protection, all travellers to North West and Western provinces should take meticulous antimosquito measures during the daytime. The rest of the country is considered risk free.

47 For your protection, vaccination is recommended for all travellers over 9 months of age going to areas south of the Sahara Desert. Note: Khartoum is risk free.

48 A Yellow Fever vaccination certificate is only required for travellers going to Sint Eustatius.

49 All travellers must show proof of vaccination with quadrivalent ACWY upon arrival.

50 Due to ongoing outbreaks, proof of Measles vaccination is required from certain travellers upon entry. Exit requirements may also be enforced for some travellers. See www.iamat.org for specific details.

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