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> Status as of December 11, 2020



# World Immunization Chart

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

## 2020 Edition

This content is no longer being reviewed or updated.

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Afghanistan	<b>PO3, V2: RI, HA12, TF10</b> SV: HB13, RA15
Albania	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: HB13, RA15, TBE18
Algeria	<b>Y6<math>\beta</math>, 8, 51, V2: RI, HA12</b> SV: HB13, RA15, TF9
American Samoa	<b>V1: RI, HA12</b> SV: HB13, TF9
Andorra	<b>V1: RI</b>
Angola	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Anguilla	<b>V1: RI, HA12</b> SV: TF9
Antigua and Barbuda	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: TF9
Argentina	<b>Y23, V1: RI, HA12</b> SV: RA15, TF9
Armenia	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Aruba, Bonaire, Curaçao	<b>Y6<math>\beta</math>, 8, 50, V2: RI, HA12</b> SV: TF9
Australia	<b>Y6<math>\gamma</math>, 8, 30, V2: RI</b> SV: HB14, JE17
Austria	<b>V1: RI</b> SV: TBE18
Azerbaijan	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Azores	<b>V1: RI</b>
Bahamas	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b>
Bahrain	<b>Y6<math>\beta</math>, 8, V2: RI, HA12</b> SV: HB13, RA15
Bangladesh	<b>Y6<math>\gamma</math>, 7, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Barbados	<b>Y6<math>\gamma</math>, 41, V2: RI, HA12</b> SV: TF9
Belarus	<b>V1: RI, HA12</b> SV: HB13, TBE18, RA15
Belgium	<b>V1: RI</b>
Belize	<b>Y6<math>\gamma</math>, 7, PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
Benin	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9

Bermuda	<b>V1: RI</b>
Bhutan	<b>V1: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Bolivia	<b>Y6<math>\gamma</math>, 37, V2: RI, HA12</b> SV: HB13, RA15, TF9
Bosnia and Herzegovina	<b>V1: RI, HA12</b> SV: HB13, RA15, TBE18
Botswana	<b>Y6<math>\gamma</math>, 7, V2: RI, HA12</b> SV: HB13, RA15, TF9
Brazil	<b>Y34, V1: RI, HA12</b> SV: HB13, RA15, TF9
Brunei Darussalam	<b>Y6<math>\beta</math>, 8, PO3, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Bulgaria	<b>V1: RI, HA12</b> SV: HB13, RA15
Burkina Faso	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Burundi	<b>Y5<math>\beta</math>, V2: RI, HA12</b> SV: HB13, RA15, TF9
Cabo Verde	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: HB13, TF9
Cambodia	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Cameroon	<b>Y5<math>\gamma</math>, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Canada	<b>V1: RI</b> SV: HB14
Canary Islands	<b>V1: RI</b>
Cayman Islands	<b>V1: RI, HA12</b> SV: TF9
Central African Republic	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Chad	<b>Y6<math>\beta</math>, 8, 22, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Chile	<b>V1: RI, HA12</b> SV: TF9
China – Mainland	<b>Y6<math>\beta</math>, 7, V2: RI, PO4, HA12</b> SV: HB13, JE17, RA15, TBE18, TF9
– Hong Kong	<b>V1: RI, HA12</b> SV: HB13, TF9
– Macao	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9

Christmas Island	<b>Y6<math>\gamma</math>, 8, 30, V2: RI, HA12</b> SV: TF9
Colombia	<b>Y35, V2: RI, HA12</b> SV: HB13, RA15, TF9
Comoros	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Congo – Republic	<b>Y5<math>\beta</math>, V2: RI, HA12</b> SV: HB13, RA15, TF9
Congo – Dem. Rep.	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: C11, HB13, RA15, TF9
Cook Islands	<b>V1: RI, HA12</b> SV: HB13, TF9
Costa Rica	<b>Y6<math>\beta</math>, 38, V2: RI, HA12</b> SV: HB13, RA15, TF9
Côte d'Ivoire	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Croatia	<b>V1: RI, HA12</b> SV: TBE18, RA15
Cuba	<b>Y6<math>\beta</math>, 8, V2: RI, HA12</b> SV: RA15, TF9
Cyprus	<b>V1: RI</b>
Czech Republic   Czechia	<b>V1: RI, HA12</b> SV: TBE18
Denmark	<b>V1: RI</b> SV: TBE18
Djibouti	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Dominica	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: TF9
Dominican Republic	<b>Y24, V2: RI, HA12</b> SV: HB13, RA15, TF9
Ecuador	<b>Y21, V2: RI, HA12</b> SV: HB13, RA15, TF9
Egypt	<b>Y6<math>\beta</math>, 8, 31, PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
El Salvador	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9
Equatorial Guinea	<b>Y6<math>\beta</math>, 28, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Eritrea	<b>Y6<math>\beta</math>, 42, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Estonia	<b>V1: RI, HA12</b> SV: TBE18, RA15

- 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
- 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.**

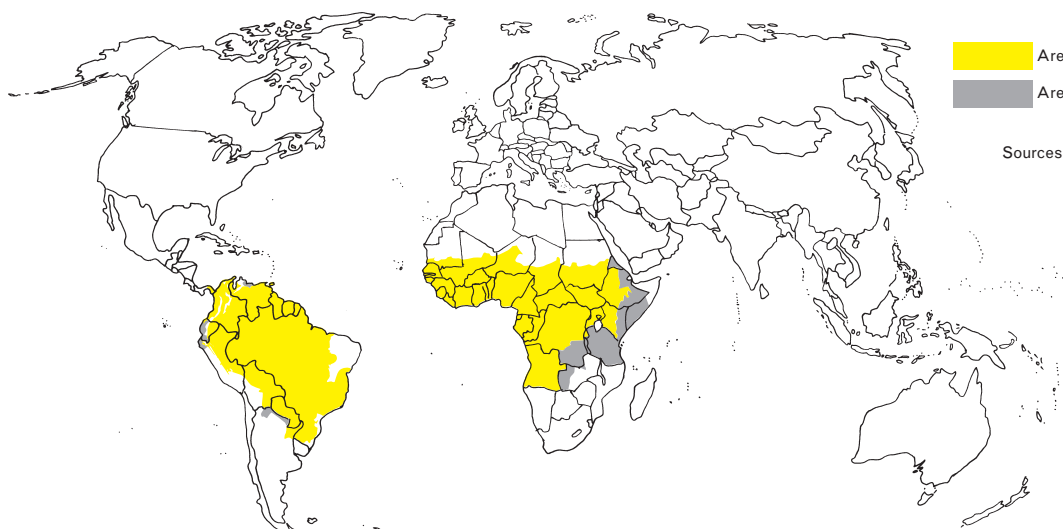
- α A vaccination certificate is required for children 6 months of age and older. †
- β A vaccination certificate is required for children 9 months of age and older.
- γ A vaccination certificate is required for children 1 year of age and older.
- δ A vaccination certificate is required for children of all ages. †

† *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.*

Eswatini   Swaziland	<b>Y6β, 7, V2: RI, HA12</b> SV: HB13, RA15, TF9
Ethiopia	<b>Y6β, 8, 43, V2: RI, PO4, HA12, M16</b> SV: C11, HB13, RA15, TF9
Falkland Islands	<b>V1: RI</b>
Faroe Islands	<b>V1: RI</b>
Fiji	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, TF9
Finland	<b>V1: RI</b> SV: HB14, TBE18
France	<b>V1: RI</b> SV: TBE18
French Guiana	<b>Y6γ, 28, V2: RI, HA12</b> SV: HB13, RA15, TF9
French Polynesia	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, TF9
Gabon	<b>Y5γ, 28, V2: RI, HA12</b> SV: HB13, RA15, TF9
Gambia	<b>Y6β, 8, 28, M49, V2: RI, HA12</b> SV: HB13, RA15, TF9
Georgia	<b>PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
Germany	<b>V1: RI</b> SV: TBE18
Ghana	<b>Y5β, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Gibraltar	<b>V1: RI</b>
Greece	<b>V1: RI</b>
Greenland	<b>V1: RI</b> SV: HB14, RA15
Grenada	<b>Y6γ, 8, V2: RI, HA12</b> SV: RA15, TF9
Guadeloupe	<b>Y6γ, 8, V2: RI, HA12</b> SV: TF9
Guam	<b>V1: RI, HA12</b> SV: HB13, TF9
Guatemala	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9
Guinea	<b>Y6β, 28, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9

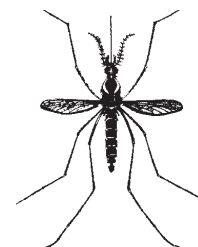
Guinea-Bissau	<b>Y5γ, 28, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Guyana	<b>Y6γ, 28, 51, V2: RI, HA12</b> SV: HB13, RA15, TF9
Haiti	<b>Y6γ, V2: RI, HA12, TF10</b> SV: HB13, RA15
Honduras	<b>Y6γ, V2: RI, HA12</b> SV: HB13, RA15, TF9
Hungary	<b>V1: RI, HA12</b> SV: TBE18
Iceland	<b>V1: RI</b>
India	<b>Y6β, 40, PO3, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Indonesia	<b>Y6β, M52, V2: RI, PO4, HA12, TF10</b> SV: HB13, JE17, RA15
Iran	<b>Y6β, 8, PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
Iraq	<b>Y6β, 8, PO3, M53, V2: RI, HA12, TF10</b> SV: HB13, RA15
Ireland	<b>V1: RI</b>
Israel	<b>V1: RI</b> SV: HB13, RA15
Italy	<b>V1: RI</b> SV: TBE18
Jamaica	<b>Y6γ, 8, V2: RI, HA12</b> SV: TF9
Japan	<b>V1: RI</b> SV: HB13, JE17, TBE18
Jordan	<b>Y6γ, 8, PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
Kazakhstan	<b>Y6δ, 7, V2: RI, HA12</b> SV: HB13, RA15, TBE18, TF9
Kenya	<b>Y6γ, 8, 44, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Kiribati	<b>V1: RI, HA12</b> SV: HB13, TF9

Korea – North	<b>Y6γ, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Korea – South	<b>V1: RI, HA12</b> SV: HB13, JE17, RA15, TBE18, TF9
Kuwait	<b>V1: RI, HA12</b> SV: HB13
Kyrgyzstan	<b>V1: RI, HA12</b> SV: HB13, RA15, TBE18, TF9
Laos	<b>V1: RI, PO4, HA12, TF10</b> SV: HB13, JE17, RA15
Latvia	<b>V1: RI, HA12</b> SV: TBE18, RA15
Lebanon	<b>PO3, M54, V2: RI, HA12</b> SV: HB13, RA15, TF9
Lesotho	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Liberia	<b>Y6β, 28, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Libya	<b>Y6γ, PO3, M49, V2: RI, HA12</b> SV: HB13, RA15, TF9
Liechtenstein	<b>V1: RI</b> SV: TBE18
Lithuania	<b>V1: RI, HA12</b> SV: TBE18, RA15
Luxembourg	<b>V1: RI</b>
Madagascar	<b>Y6β, 8, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Madeira Islands	<b>V1: RI</b>
Malawi	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9
Malaysia	<b>Y6γ, 8, V2: RI, PO4, HA12, TF10</b> SV: HB13, JE17, RA15
Maldives	<b>Y6β, 8, PO3, V2: RI, HA12, TF10</b>
Mali	<b>Y5β, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Malta	<b>Y6β, 8, 25, V2: RI</b>
Marshall Islands	<b>V1: RI, HA12</b> SV: HB13, TF9



Areas of travel where vaccination is recommended  
 Areas of travel where vaccination is generally not recommended

Sources: IAMAT, CATMAT, CDC, CRM, NATHNAC, ProMED-mail, WHO



*Aedes aegypti*  
(carrier of urban Yellow Fever)

Martinique	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: TF9	Nicaragua	<b>Y6<math>\beta</math>, V2: RI, HA12</b> SV: HB13, RA15, TF9	Puerto Rico	<b>V1: RI, HA12</b> SV: RA15, TF9
Mauritania	<b>Y6<math>\gamma</math>, 22, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9	Niger	<b>Y5<math>\beta</math>, M55, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9	Qatar	<b>PO3, V2: RI, HA12</b> SV: HB13
Mauritius	<b>V1: RI, HA12</b> SV: TF9	Nigeria	<b>Y5<math>\beta</math>, V2: RI, PO4, HA12, M16</b> SV: C11, HB13, RA15, TF9	Réunion	<b>V1: RI, HA12</b> SV: HB13, TF9
Mayotte	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9	Niue	<b>Y6<math>\beta</math>, V2: RI, HA12</b> SV: HB13, TF9	Romania	<b>V1: RI, HA12</b> SV: HB13, TBE18, RA15
Mexico	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9	North Macedonia	<b>V1: RI, HA12</b> SV: RA15	Russia	<b>V1: RI, HA12</b> SV: HB13, JE17, TBE18, RA15
Micronesia, Federated States	<b>V1: RI, HA12</b> SV: TF9	Northern Mariana Islands	<b>V1: RI, HA12</b> SV: HB13, TF9	Rwanda	<b>Y6<math>\gamma</math>, 27, V2: RI, HA12</b> SV: HB13, RA15, TF9
Moldova	<b>V1: RI, HA12</b> SV: HB13, RA15	Norway	<b>V1: RI</b> SV: HB14, TBE18	Saba and Sint Eustatius	<b>Y6<math>\alpha</math>, 48, V2: RI, HA12</b> SV: TF9
Monaco	<b>V1: RI</b>	Oman	<b>Y6<math>\beta</math>, 8, PO3, V2: RI, HA12</b> SV: HB13, RA15	Saint Barthélemy	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: TF9
Mongolia	<b>V1: RI, HA12</b> SV: HB13, RA15, TBE18, TF9	Pakistan	<b>Y6<math>\gamma</math>, PO3, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15	Saint Helena	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: TF9
Montenegro	<b>V1: RI</b> SV: RA15	Palau	<b>V1: RI, HA12</b> SV: HB13, TF9	Ascension	<b>V1: RI, HA12</b> SV: TF9
Montserrat	<b>Y6<math>\gamma</math>, 7, V2: RI, HA12</b> SV: TF9	Palestine	<b>V1: RI, HA12</b> SV: RA15, TF9	Tristan da Cunha	<b>V1: RI, HA12</b> SV: TF9
Morocco	<b>PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9	Panama	<b>Y6<math>\gamma</math>, 33, V2: RI, HA12</b> SV: HB13, RA15, TF9	St. Kitts and Nevis	<b>Y6<math>\gamma</math>, PO3, V2: RI, HA12</b> SV: TF9
Mozambique	<b>Y6<math>\beta</math>, 8, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9	Papua New Guinea	<b>Y6<math>\gamma</math>, 7, V2: RI, HA12</b> SV: HB13, JE17, TF9	Saint Lucia	<b>Y6<math>\beta</math>, V2: RI, HA12</b> SV: TF9
Myanmar   Burma	<b>Y6<math>\gamma</math>, 8, V2: RI, PO4, HA12, TF10</b> SV: HB13, JE17, RA15	Paraguay	<b>Y6<math>\gamma</math>, 29, V2: RI, HA12</b> SV: RA15, TF9	Saint Martin	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: TF9
Namibia	<b>Y6<math>\beta</math>, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9	Peru	<b>Y26, V1: RI, HA12</b> SV: HB13, RA15, TF9	Saint Pierre and Miquelon	<b>V1: RI</b>
Nauru	<b>V1: RI, HA12</b> SV: HB13, TF9	Philippines	<b>Y6<math>\gamma</math>, 8, PO3, M55, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15	Saint Vincent and the Grenadines	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: TF9
Nepal	<b>Y6<math>\beta</math>, 8, PO3, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15	Pitcairn Islands	<b>Y6<math>\gamma</math>, V2: RI, HA12</b> SV: TF9	Samoa	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: HB13, TF9
Netherlands	<b>V1: RI</b> SV: TBE18	Poland	<b>V1: RI</b> SV: RA15, TBE18	San Marino	<b>V1: RI</b>
New Caledonia	<b>Y6<math>\gamma</math>, 8, V2: RI, HA12</b> SV: HB13, TF9	Portugal	<b>V1: RI</b>	São Tomé and Príncipe	<b>Y6<math>\gamma</math>, 7, V2: RI, HA12</b> SV: HB13, TF9
New Zealand	<b>V1: RI</b> SV: HB14			Saudi Arabia	<b>Y6<math>\gamma</math>, 8, M20, PO19, V2: RI, HA12</b> SV: HB13, RA15

**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.

**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 and Pakistan. 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 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.

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.

**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 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.

Senegal	<b>Y6β, 7, 28, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Serbia	<b>V1: RI</b> SV: HB13, RA15
Seychelles	<b>Y6γ, 7, PO3, V2: RI, HA12</b> SV: HB13, TF9
Sierra Leone	<b>Y5δ, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Singapore	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, JE17, TF9
Sint Maarten	<b>Y6β, V2: RI, HA12</b> SV: TF9
Slovakia	<b>V1: RI</b> SV: TBE18
Slovenia	<b>V1: RI</b> SV: TBE18
Solomon Islands	<b>Y6β, V2: RI, HA12</b> SV: HB13, TF9
Somalia	<b>Y6β, 8, 45, PO3, V2: RI, HA12</b> SV: HB13, RA15, TF9
South Africa	<b>Y6γ, 8, V2: RI, HA12</b> SV: HB13, RA15, TF9
South Sudan	<b>Y5β, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Spain	<b>V1: RI</b>
Sri Lanka	<b>Y6β, 8, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Sudan	<b>Y6γ, 8, 47, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Suriname	<b>Y6γ, 8, 32, V2: RI, HA12</b> SV: HB13, RA15, TF9
Sweden	<b>V1: RI</b> SV: HB14, TBE18
Switzerland	<b>V1: RI</b> SV: TBE18
Syria	<b>PO3, V2: RI, HA12, TF10</b> SV: HB13, RA15
Taiwan	<b>V1: RI, HA12</b> SV: HB13, JE17, RA15

Tajikistan	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Tanzania	<b>Y6γ, 8, 27, V2: RI, HA12</b> SV: HB13, RA15, TF9
Thailand	<b>Y6β, 8, V2: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Timor-Leste	<b>V1: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Togo	<b>Y5β, V2: RI, PO4, HA12, M16</b> SV: HB13, RA15, TF9
Tokelau	<b>RI50, V2: HA12</b> SV: HB13, TF9
Tonga	<b>V1: RI, HA12</b> SV: HB13, TF9
Trinidad and Tobago	<b>Y6γ, 8, 39, V2: RI, HA12</b> SV: TF9
Tunisia	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Turkey	<b>V1: RI, HA12</b> SV: RA15, TF9
Turkmenistan	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Turks and Caicos	<b>V1: RI</b>
Tuvalu	<b>V1: RI, HA12</b> SV: HB13, TF9
Uganda	<b>Y5γ, 28, V2: RI, HA12, M16</b> SV: HB13, RA15, TF9
Ukraine	<b>V1: RI, PO4, HA12</b> SV: HB13, RA15, TBE18
United Arab Emirates	<b>Y6β, 8, V2: RI, HA12</b> SV: HB13
United Kingdom	<b>V1: RI</b>
United States of America	<b>V1: RI</b> SV: HB14
Uruguay	<b>V1: RI, HA12</b> SV: RA15, TF9
Uzbekistan	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9

Vanuatu	<b>V1: RI, HA12</b> SV: HB13, TF9
Vatican City	<b>V1: RI</b>
Venezuela	<b>Y36, V2: RI, HA12</b> SV: HB14, RA15, TF9
Vietnam	<b>V1: RI, HA12, TF10</b> SV: HB13, JE17, RA15
Virgin Islands – UK	<b>V1: RI, HA12</b> SV: TF9
Virgin Islands – USA	<b>V1: RI, HA12</b> SV: TF9
Wake Island	<b>V1: RI, HA12</b> SV: TF9
Wallis and Futuna	<b>Y6γ, 8, V2: RI, HA12</b> SV: TF9
Western Sahara	<b>V1: RI, HA12</b> SV: HB13, RA15, TF9
Yemen	<b>V1: RI, HA12, TF10</b> SV: C11, HB13, RA15
Zambia	<b>Y6γ, 8, 46, V2: RI, PO4, HA12</b> SV: HB13, RA15, TF9
Zimbabwe	<b>Y6β, 8, V2: RI, HA12</b> 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 [www.iamat.org](http://www.iamat.org) 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 Polio virus transmission should receive a booster dose between 4 weeks and 12 months prior to international travel. For a complete list of Polio-affected 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.
- 7** 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.
- 11** 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 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 non-immune 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 Strait Islands and Cape York Peninsula. Transmission occurs from December to May.  
**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.  
**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 New Territories. 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 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 occurs from June to October.  
**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 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 [www.iamat.org](http://www.iamat.org) to see country-specific information detailing areas at risk and where vaccination is recommended. 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: [www.sawyer.com](http://www.sawyer.com)).
- 19** Travellers arriving countries with active poliovirus transmission (including wild or vaccine-derived poliovirus) and from countries at risk of poliovirus transmission 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. For a complete list of polio-affected countries, see [Global Polio Eradication Initiative](#).  
Proof of vaccination is required from all travellers arriving from Afghanistan, Democratic Republic of the Congo, Mozambique, Myanmar, Niger, Nigeria, Pakistan, Papua New Guinea, Somalia, Syria, and Yemen. 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 ACYW-135 (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 that the traveller was vaccinated with the conjugate vaccine for the 5-year validity to apply.  
Vaccination is also required for domestic pilgrims, residents of Mecca and Medina, and any persons participating in Hajj or Umrah or seasonal or pilgrimage work in Hajj and Umrah zones.  
At the discretion of the Ministry of Health, travellers may be administered prophylactic antibiotics upon arrival.
- 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-Chinchipec.

**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 Guazu 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 2,300 m / 7,546 ft in the Amazon Basin (east of the Andes Mountains) and the lowland areas of 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 free.

**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 daytime.

**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** For your protection, 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 Islands 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, Paraíba, Pernambuco, 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.

**Note:** Vaccination is not recommended if only travelling to cities of Barranquilla, Cali, Cartagena and Medellín. 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 Sucumbios y Zamora-Chinchipec.

**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 Trinidad and Tobago unless an 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 (Northern 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 anti-mosquito 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** Entry to Aruba will be denied if travellers cannot provide a valid vaccination certificate.

**51** A Yellow Fever vaccination certificate is required for travellers who are in airport transit for more than 4 hours in a country with risk of Yellow Fever transmission.

**Note:** Proof of vaccination is not required from travellers who arrive from or transit through an airport in Argentina, Paraguay, or Trinidad and Tobago.

**52** Travellers arriving from or departing to Saudi Arabia must show proof of vaccination with quadrivalent ACYW-135.

**53** Proof of vaccination is required from travellers arriving 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). Vaccination with quadrivalent ACYW-135 must be issued not less than 10 days before arrival.

Travellers departing Iraq to the above countries as well as Hajj and Umrah workers must also provide proof of vaccination prior to travel.

**54** Proof of vaccination with quadrivalent ACYW-135 is required for travellers departing Lebanon and going to Hajj, Umrah, and to certain African countries (check with your Embassy or Consulate).

**55** Proof of vaccination with quadrivalent ACYW-135 is required for travellers going to Hajj and Umrah.