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In the report "Update: Recommendations of the Advisory Committee on Immunization Practices for Use of Hepatitis A Vaccine for Postexposure Prophylaxis and for Preexposure Prophylaxis for International Travel," errors occurred in Table 1. The corrected Table 1 is below.

TABLE 1. Recommendations for postexposure prophylaxis and preexposure protection, by age group and risk category

Indication/ Age group	Risk category/ Health status	Hepatitis A vaccine	lmmune globulin
Postexposure prophylaxis			
<12 mos	Healthy	No	0.1 mL/ kg
12 mos-40 yrs	Healthy	1 dose [†]	None
>40 yrs	Healthy	1 dose [†]	0.1 mL/kg [§]
≥12 mos	Immunocompromised or chronic liver disease	1 dose [†]	0.1 mL/kg [¶]
≥12 mos	Vaccine contraindicated**	No	0.1 mL/kg
Preexposure protection ^{††}			
<6 mos	Healthy	No	0.1–0.2 mL/kg ^{§§}
6-11 mos	Healthy	1 dose ^{¶¶}	None
12 mos-40 yrs	Healthy	1 dose***	None
>40 yrs	Healthy	1 dose***	0.1-0.2 mL/kg ^{§§,†††}
>6 mos	Immunocompromised or chronic liver disease	1 dose***	0.1–0.2 mL/kg ^{§§,†††}
>6 mos	Persons who elect not to receive vaccine or for whom vaccine is contraindicated	No	0.1–0.2 mL/kg ^{§§}

^{*} Measles, mumps, and rubella vaccine should not be administered for at least 3 months after receipt of immune globulin.

[†] A second dose is not required for postexposure prophylaxis; however, for long-term immunity, the hepatitis A vaccination series should be completed with a second dose at least 6 months after the first dose.

[§] The provider's risk assessment should determine the need for immune globulin administration. If the provider's risk assessment determines that both vaccine and immune globulin are warranted, Hepatitis A vaccine and immune globulin should be administered simultaneously at different anatomic sites.

 $[\]P$ Vaccine and immune globulin should be administered simultaneously at different anatomic sites.

^{**} Life-threatening allergic reaction to a previous dose of hepatitis A vaccine, or allergy to any vaccine component.

^{††} Immune globulin should be considered before travel for persons with special risk factors for either hepatitis A virus (HAV) infection or increased risk for complications in the event of exposure to HAV.

^{§§ 0.1} mL/kg for travel up to 1 month; 0.2 mL/kg for travel up to 2 months, 0.2 mL/kg every 2 months for travel of ≥2 months' duration.

^{¶¶} This dose should not be counted toward the routine 2-dose series, which should be initiated at age 12 months.

^{***} For persons not previously vaccinated with HepA vaccine, administer dose as soon as travel is considered, and complete series according to routine schedule.

^{†††} May be administered, based on providers' risk assessment.