

Welcome to
California Department of Public Health
Immunization Branch

**Vaccines for Children (VFC)
Afternoon TEACH Webinar:
Beating the Back to School Rush: Proactive Planning for
School Vaccination Compliance & Exemptions**



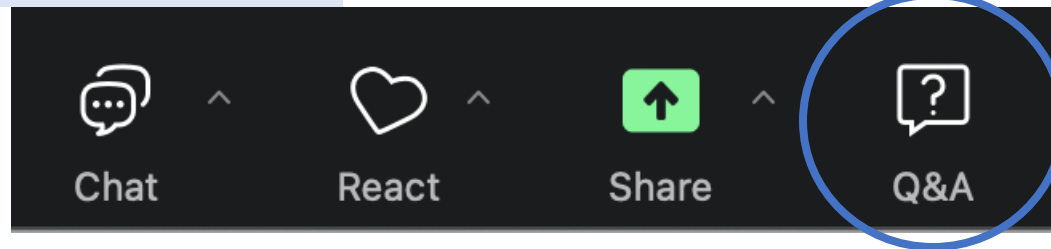
Wednesday, June 26, 2024
12:00 pm – 1:00 pm (PT)



Questions

During today's webinar, please use the Q&A panel to ask your questions so CDPH panelists and subject matter experts (SMEs) can respond.

Resource links will be dropped into, "Chat"



Housekeeping

Reminder to Attendees:



Today's session is being recorded. Access today's slides and archived presentations at: eziz.org



If you have post-webinar-related questions, please email diane.evans@cdph.ca.gov

Reminder to Panelists:



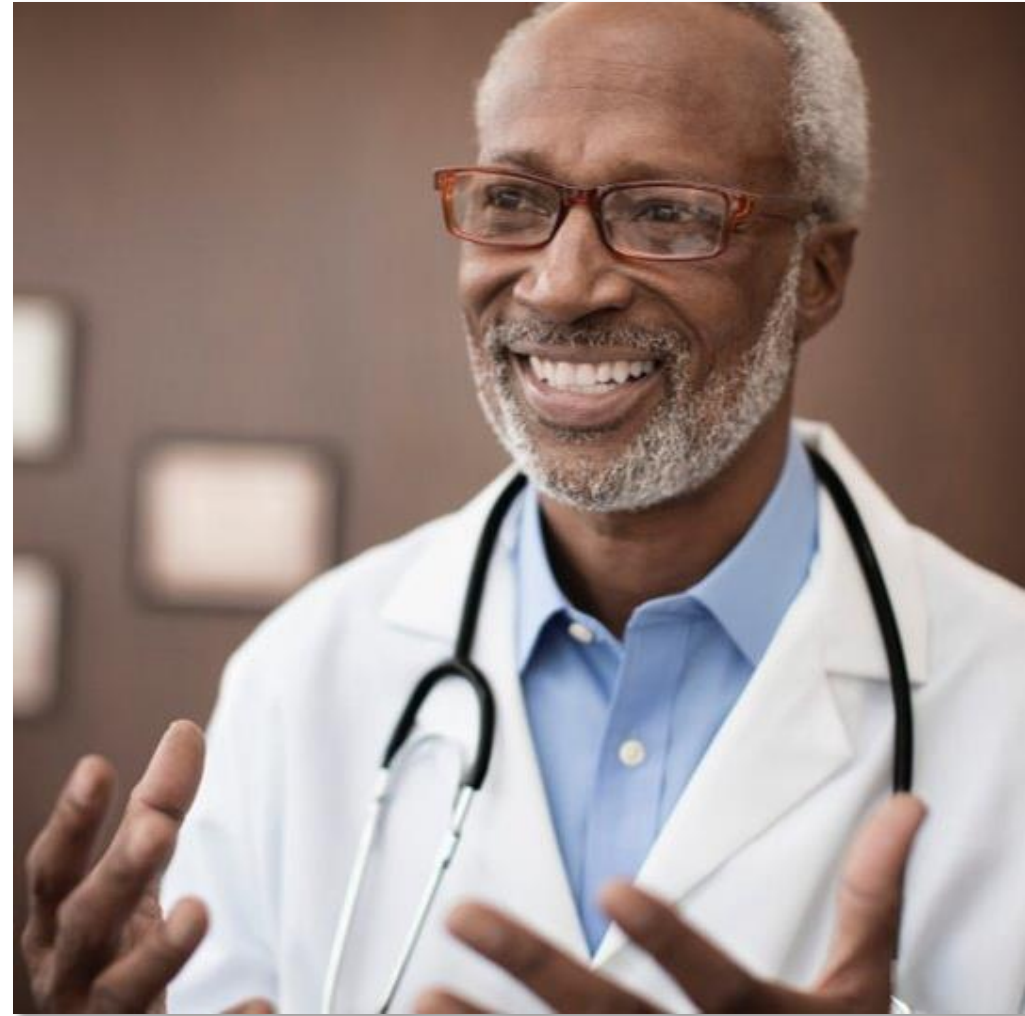
Please mute yourself when not speaking.

Please monitor the Q&A panel for questions you may be able to answer.

Webinar Objectives

By the end of the presentation, attendees should be able to:

- Summarize back-to-school vaccination requirements and recent vaccination coverage rates.
- Implement strategies on how to get patients caught up on vaccines before the back-to-school rush.
- Demonstrate how to utilize CAIR-ME for medical exemption requirements.
- Utilize the MyTurn Locator tool to increase clinic visibility.



Agenda: Wednesday, June 26, 2024

No.	Item	Speaker(s)	Time (PM)
1	Welcome	Diane Evans	12:00 – 12:05
2	Back to School Topics	Samantha Johnston, MD, MPH	12:05 – 12:15
3	Vaccination Coverage Rates	Samantha Johnston, MD, MPH	12:15 – 12:20
4	Keeping Patients Up to Date on Vaccinations	Samantha Johnston, MD, MPH	12:20 – 12:25
5	CAIR-ME	Louise McNitt, MD	12:25 – 12:35
6	Reminders Regarding VFC Policies on Inventory (private for COVID & RSV)	Claudia Aguiluz	12:35 – 12:45
7	Resources	Terisha Gamboa, Josh Pocus	12:45 – 12:55
8	Questions and Answers	CDPH Subject Matter Experts	12:55 – 1:00

Thank you for attending today!



Back to School Topics

Samantha Johnston, MD, MPH

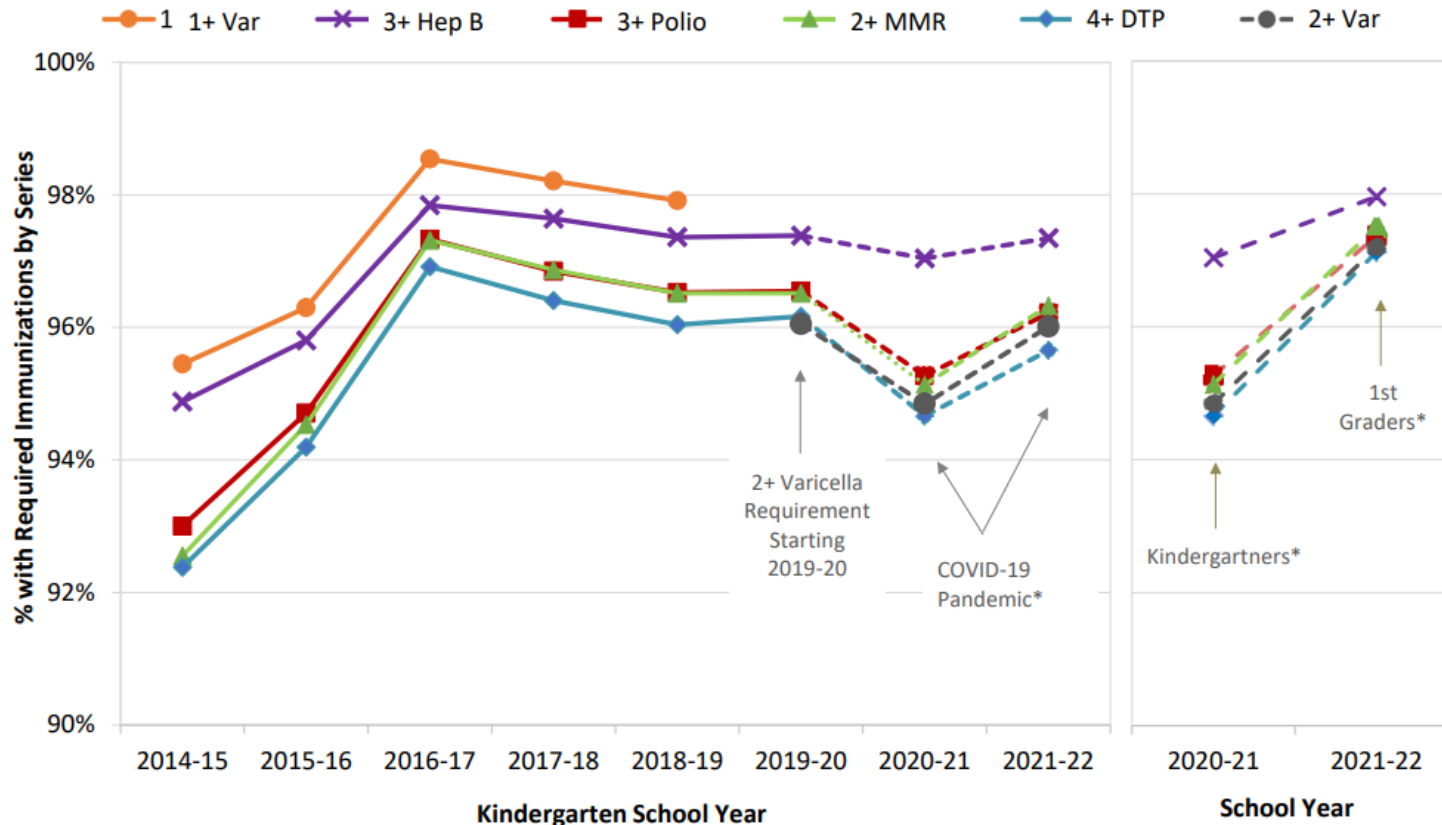


Agenda

- Kindergarten vaccine coverage rates
- Overview of ACIP vaccine recommendations
- Overview of K-12 Immunization requirements
- Strategies for improving vaccination rates
- Specific vaccine reminders

California Kindergarten Immunization Rates

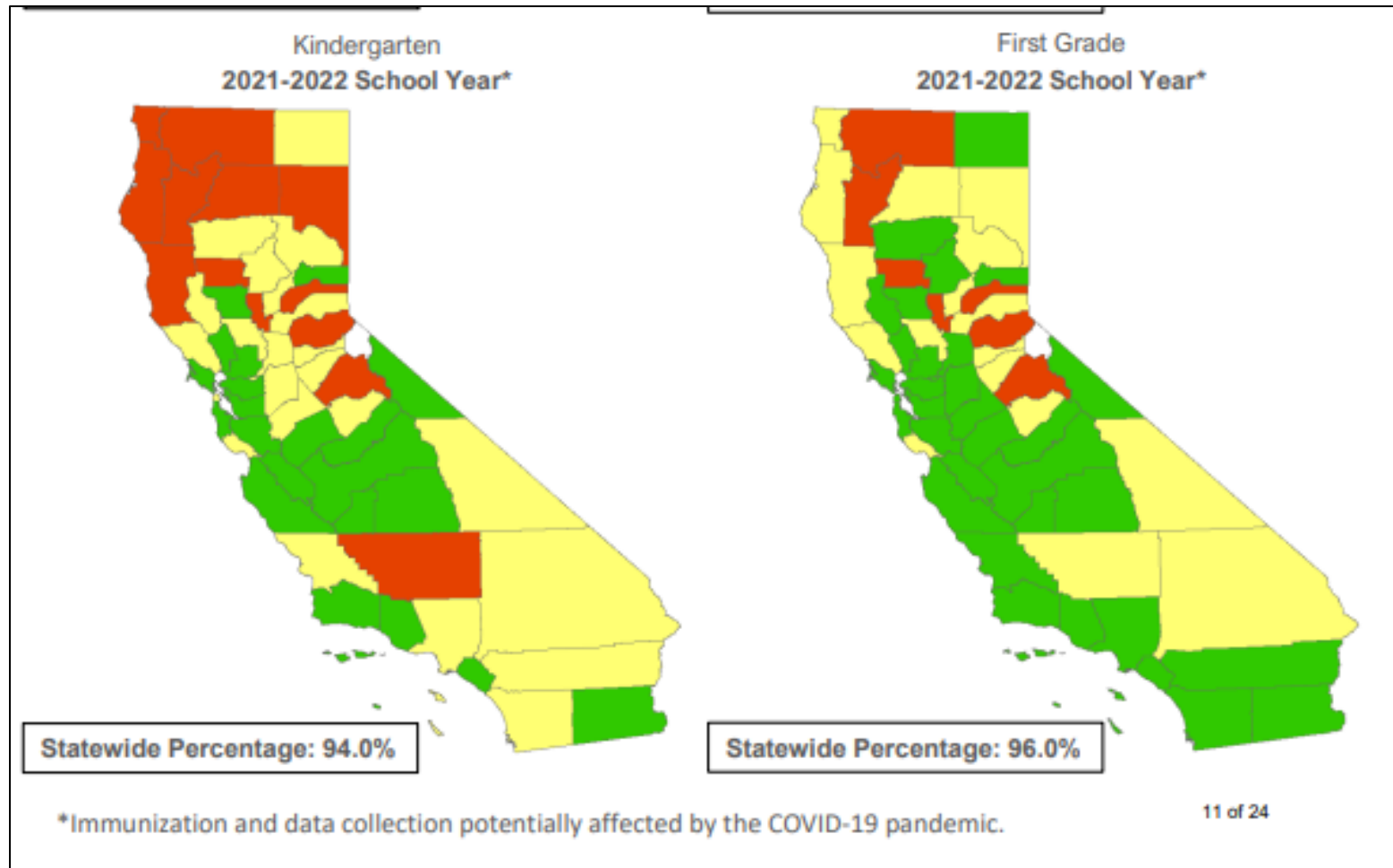
Figure 2. Percentage of Students with Specific Required Immunizations by Series and School Year
 Left: Kindergarteners in the 2014-2015 to 2021-2022 School Years
 Right: Kindergarteners in the 2020-2021 School Year and First Graders in the 2021-2022 School Year



*Immunization and data collection potentially affected by the COVID-19 pandemic.

- Many children missed well visits and recommended vaccines during the pandemic.
- In 2022-23, school-reported CA statewide MMR rate was 96.5% for kindergarten vs 93.1% for US.

Geographic Variability

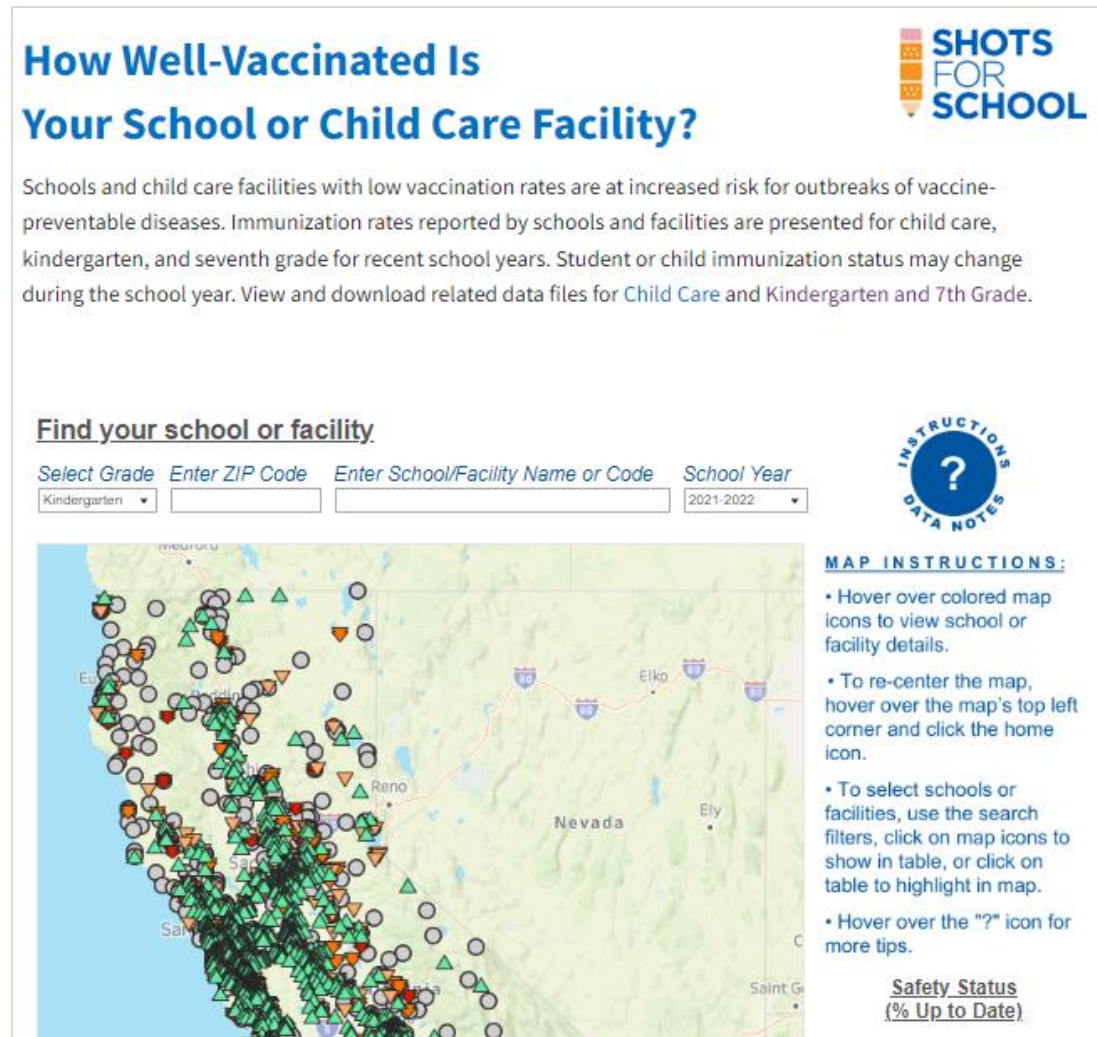


County-specific and school-level MMR rates vary widely.



School Reporting Data - Statewide

New Dashboard



ACIP Recommended Vaccines

- [Birth-18 Years Immunization Schedule – Healthcare Providers | CDC](#)

Vaccine and other immunizing agents	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos
Respiratory syncytial virus ⓘ (RSV-mAb [Nirsevimab])	1 dose depending on maternal RSV vaccination status, See notes					1 dose (8 through 19 months), See notes		
Hepatitis B ⓘ (HepB)	1 st dose	←2 nd dose→			←3 rd dose→			
Rotavirus (RV) ⓘ RV1 (2-dose series); RV5 (3-dose series)			1 st dose	2 nd dose	See notes			
Diphtheria, tetanus, & acellular pertussis ⓘ (DTaP: <7 yrs)			1 st dose	2 nd dose	3 rd dose			←4 th dose→
Haemophilus influenzae type b ⓘ (Hib)			1 st dose	2 nd dose	See notes		←3 rd or 4 th dose, See notes →	
Pneumococcal conjugate ⓘ (PCV15, PCV20)			1 st dose	2 nd dose	3 rd dose		←4 th dose→	
Inactivated poliovirus ⓘ (IPV: <18 yrs)			1 st dose	2 nd dose	←3 rd dose→			

School Immunization Requirements

- Immunizations required for school attendance in California are a subset of ACIP-recommended immunizations
- Derived from state laws and regulations
 - [California Health and Safety Code, Sections 120325-120375](#)
 - [California Code of Regulations Title 17 Division 1, Chapter 4, Subchapter 8](#)
- If a child has received all ACIP recommended vaccines on time, school immunization requirements will be met
 - Doses given outside of the 4-day grace period will not be counted (e.g., if MMR vaccine is given >4 days before the 1st birthday, it will not be considered a valid dose)



School-Required Immunizations

CALIFORNIA IMMUNIZATION REQUIREMENTS FOR

K – 12TH GRADE (including transitional kindergarten)



GRADE	NUMBER OF DOSES REQUIRED OF EACH IMMUNIZATION ^{1, 2, 3}				
K-12 Admission	4 Polio⁴	5 DTaP⁵	3 Hep B⁶	2 MMR⁷	2 Varicella
(7th-12th)⁸	K-12 doses	+ 1 Tdap			
7th Grade Advancement^{9,10}		1 Tdap⁸			2 Varicella¹⁰

- Requirements for K-12 admission also apply to transfer pupils.
- Combination vaccines (e.g., MMRV) meet the requirements for individual component vaccines. Doses of DTP count towards the DTaP requirement.
- Any vaccine administered four or fewer days prior to the minimum required age is valid.
- Three doses of polio vaccine meet the requirement if one dose was given on or after the 4th birthday.
- Four doses of DTaP meet the requirement if at least one dose was given on or after the 4th birthday. Three doses meet the requirement if at least one dose of Tdap, DTaP, or DTP vaccine was given on or after the 7th birthday (also meets the 7th-12th grade Tdap requirement. See fn. 8.)

One or two doses of Td vaccine given on or after the 7th birthday count towards the K-12 requirement.

- For 7th grade admission, refer to Health and Safety Code section 120335, subdivision (c).
- Two doses of measles, two doses of mumps, and one dose of rubella vaccine meet the requirement, separately or combined. Only doses administered on or after the 1st birthday meet the requirement.
- For 7th-12th graders, at least one dose of pertussis-containing vaccine is required on or after the 7th birthday.
- For children in ungraded schools, pupils 12 years and older are subject to the 7th grade advancement requirements.
- The varicella requirement for seventh grade advancement expires after June 30, 2025.

You are the Key!

- Children are excluded from school until they are brought up to date or started on a vaccine schedule under Conditional Admission requirements.
- Providers are **essential** to getting students vaccinated so that they may attend school.
- Students and families rely on providers to help get them vaccinated and ready for school.



RISE: Routine Immunizations on Schedule for Everyone

- [Resources to Encourage Routine Childhood Vaccinations | CDC](#)
- [Routine Immunizations on Schedule for Everyone \(RISE\) | CDC](#)

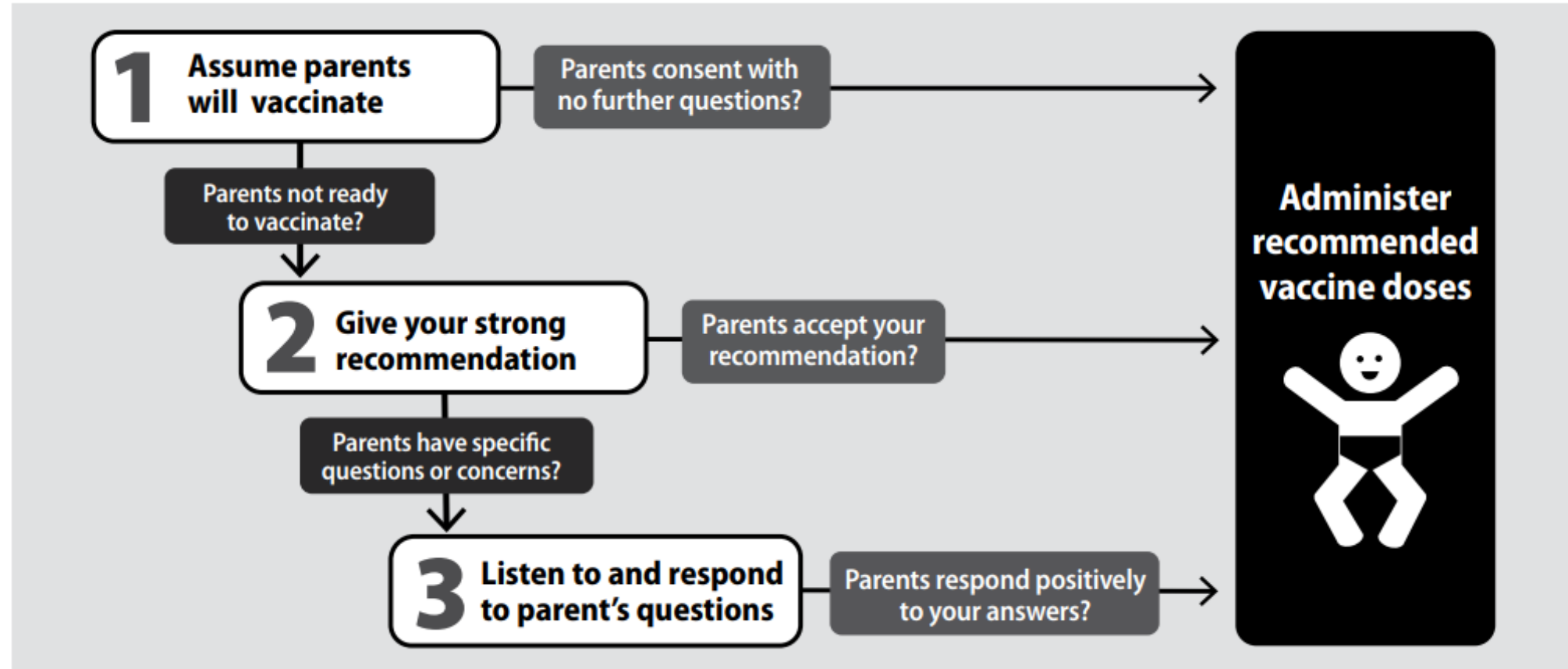


Foster Support for Vaccination in Your Practice

- Make strong, effective recommendations
- Research has shown an effective recommendation from a healthcare professional is the **main reason parents decide to vaccinate**.
- Use **every visit** – including well-child checks, sports physicals, and other appointments – as an opportunity to recommend and administer all vaccines that are due.

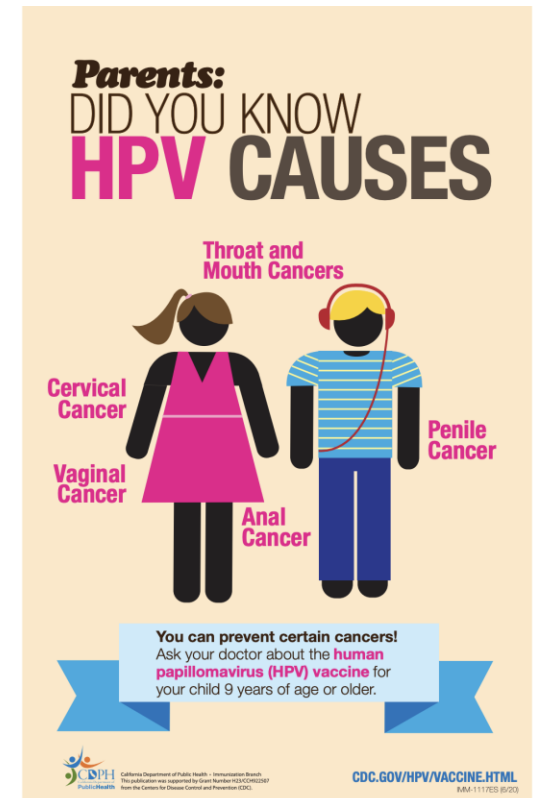
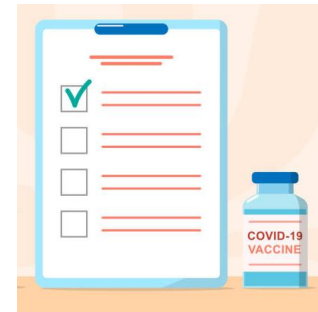


Presumptive Approach



Foster Support for Vaccination in Your Practice

- Make patients/parents aware of your immunization policy
- Make vaccine resources easy to find
 - Provide age-appropriate vaccine [educational materials/display posters](#) in the waiting room.
- Review each patient's vaccination status and prepare them to receive vaccines
 - At sign in, remind patients/parents which vaccines are due



[HPV Poster \(IMM-1117\)](#)

Foster Support for Vaccination in Your Practice

- Answer questions and address concerns
- Implement procedures and policies that help staff support vaccination
- Schedule upcoming vaccinations before the patient leaves the office
- Remind patients/parents about upcoming vaccination appointments and missed appointments



Start NOW to Avoid the August Crush!

- Offer vaccination-only appointments or hold vaccination clinics
 - Evening and weekend hours if possible
 - Partner with schools or local health departments to offer school-located vaccination clinics
 - Administer all ACIP-recommended vaccines along with school-required; give HPV and meningococcal at the same visit for Tdap
- Send reminders to all patients who are missing required doses
 - Run queries **NOW** on school-aged patients
 - Look for missing 5th DTaPs, or 2nd MMRs or VZVs, or missing Tdaps for anyone over age 11
- Implement your strategy as early as possible to avoid the August crush

AAP Policy Statement:

The Link Between School Attendance and Good Health

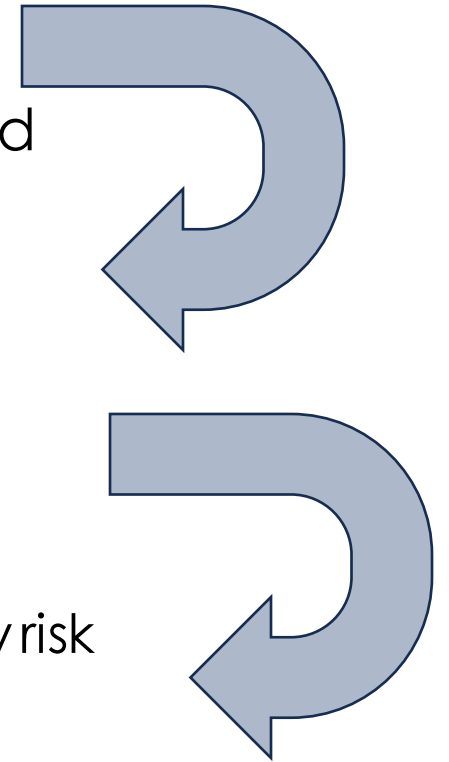
Mandy A. Allison, MD, MSPH, FAAP;^a Elliott Attisha, DO, FAAP;^b COUNCIL ON SCHOOL HEALTH

- In 2019, more than 6.5 million children in the United States, approximately 13% of all students, miss 15 or more days of school each year.
- Infectious diseases, such as flu, COVID-19, pertussis and other vaccine preventable diseases, contribute to school absenteeism.
- Routine vaccinations are one tool to help promote school attendance to keep kids healthy, in school, and ready to learn.
- Encouraging parents to vaccinate their children may reduce disruptions to childcare and learning and activities.

AAP Policy Statement: The Link Between School Attendance and Good Health

Mandy A. Allison, MD, MSPH, FAAP,^a Elliott Attisha, DO, FAAP,^b COUNCIL ON SCHOOL HEALTH

- Early chronic absenteeism
 - Future absenteeism
 - Poor academic achievement: particularly for social skills and reading
- Students with poor attendance
 - Score lower on national skills assessments
 - Predictor of school failure/dropping out of school
- Poor school performance
 - Poor adult health outcomes
 - Not having a HS diploma is associated with increased mortality risk and lower life expectancy
 - Adult unemployment or underemployment
 - Decreased social support or control



Remember College-readiness Immunizations!

College Immunization Checklist:

- ☐ Hepatitis B
- ☐ HPV (human papillomavirus)
- ☐ MMR (measles, mumps, rubella)
- ☐ Meningococcal
- ☐ Tdap (tetanus, diphtheria, pertussis)
- ☐ Varicella (chickenpox)



Pertussis (Whooping Cough)

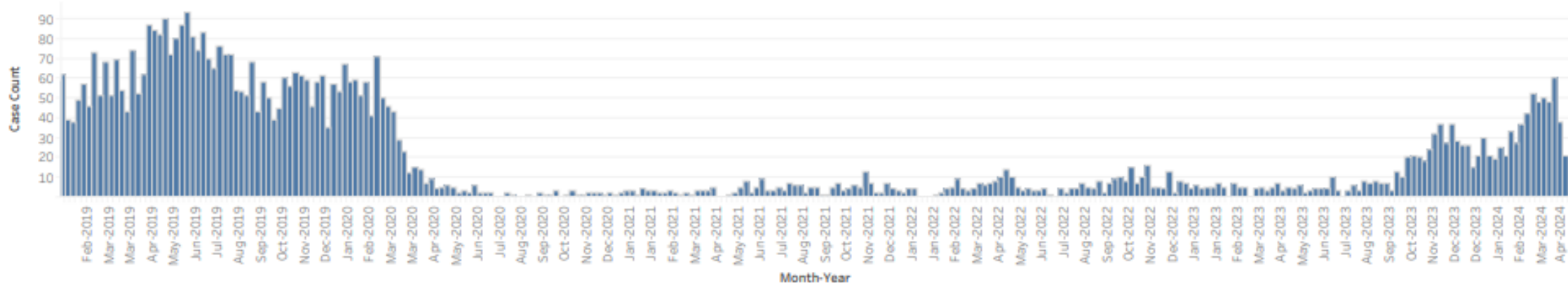
- Highly contagious bacterial disease spread by coughing
- Infants younger than 1 year are at greatest risk of severe or life-threatening disease
- Recent large outbreaks in California
 - 2010 >9,000 reported cases.
 - 2014 11,209 reported cases, including 3 infant deaths.
- Typically peaks every 3-5 years, but there has been a lull in recent years.



Pertussis Snapshot

Reported as of April 30, 2024

Figure 1. Year to date* pertussis case counts by week of onset – California, 2019-2024



Note: The case counts shown are preliminary and may change due to reporting delays.

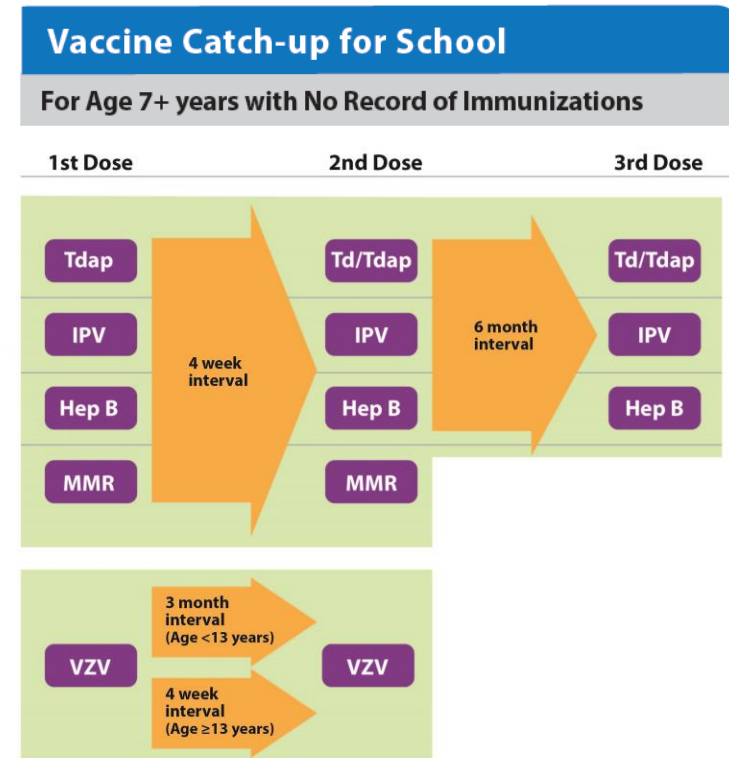
Cumulative pertussis case counts and deaths among infants < 4 months of age by year of onset, 2014-2024

	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Cases	530	325	118	127	138	180	45	11	14	15	11*
Deaths	3	1	2	0	1	1	0	0	0	0	0

Tdap/Td Series Catch-Up

- [ACIP recommendations on use of Tdap:](#)
 - People aged 7-18 years unvaccinated against pertussis, tetanus, or diphtheria, should receive a series of **three tetanus** and diphtheria toxoid-containing vaccines, including **at least 1 Tdap dose**.
- CDC - [2024 Catch-Up Guidance-Children 10 through 18-Tetanus, Diphtheria, Pertussis-Tdap/Td \(cdc.gov\)](#)

- [Vaccine Catch-up for School For Age 7+ Years & No Record of Immunizations](#)

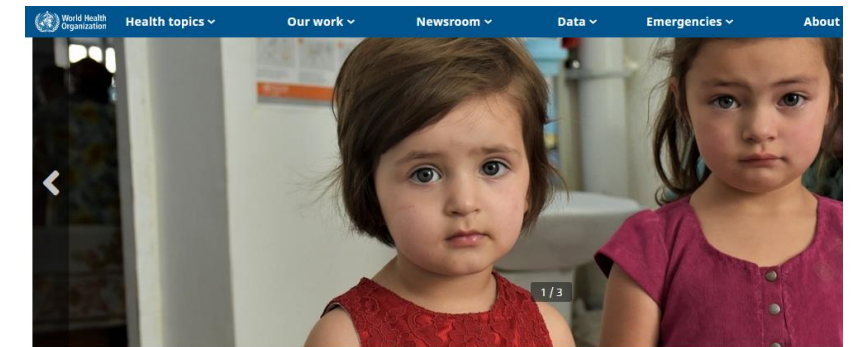


Td Supply is Constrained in 2024

- **Transition to use of Tdap** vaccine in lieu of Td vaccine.
- Tdap vaccine **is an acceptable alternative** to Td vaccine, including when a tetanus booster is indicated for wound management.
- Tdap vaccine **isn't an acceptable alternative** only when a person has a [specific contraindication to pertussis-containing vaccines](#), which is very rare.
- This guidance will remain in place until the period of temporary ordering controls for Td vaccine ends.

Measles Cases and Outbreaks Have Increased Worldwide

- Europe: Over 30,000 cases reported in 2023, 941 in 2022. Large outbreaks have occurred.
- Reflects decreased immunization during pandemic, and recent resumption of travel.
- Most severe impact in Africa, Asia, and the Eastern Mediterranean.
- Exposures abroad have resulted in multiple cases in US among returning travelers.

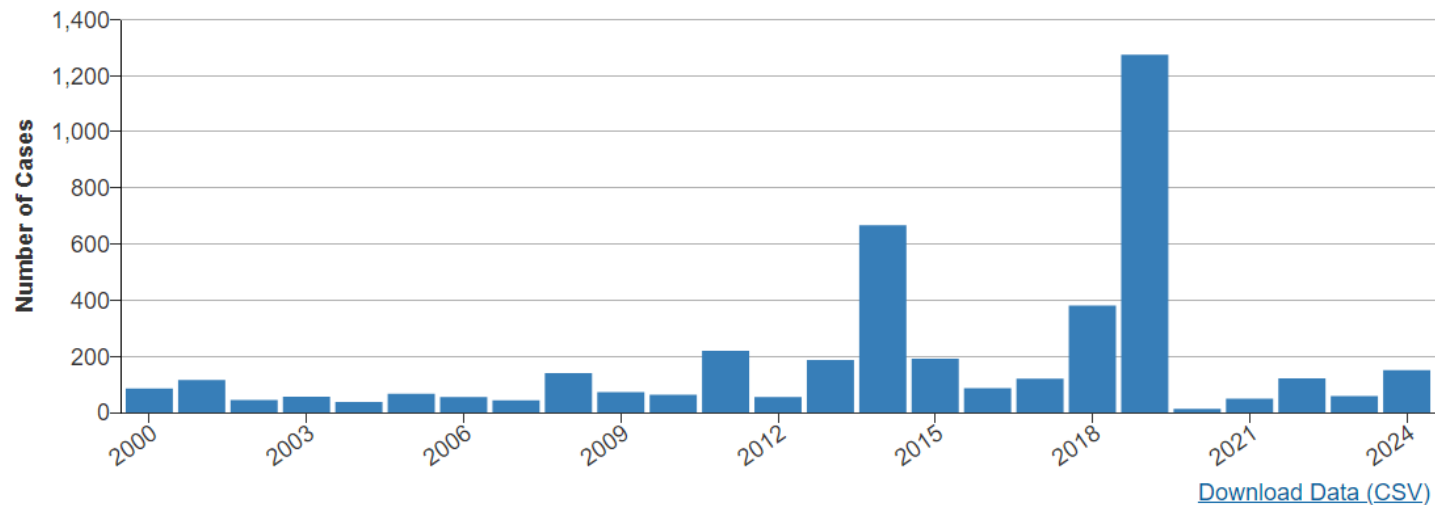


A 30-fold rise of measles cases in 2023 in the WHO European Region warrants urgent action

[Dec 2023 WHO News Release](#)
[Nov 2023 CDC Report](#)

RESOURCES: [CDPH Immunization Branch – Measles Page](#); [Measles Investigation Quicksheet \(ca.gov\)](#); [CDPH CAHAN 2/2/2024](#); [Immediate Respiratory Isolation Recommended for Persons with Suspected Measles \(ca.gov\) \(3/14/2024\)](#); [CDC Measles Information for Public Health Professionals](#); [CDC Clinician Outreach and Communication Activity: COCA Now, 1/25/2024](#); [Increase in Global and Domestic Measles: Ensure Children in the U.S. and Those Traveling Internationally 6 M and Older are Current on MMR \(cdc.gov\) 3/18/2024](#)

California Confirmed Cases as of June 15, 2024:9



[Measles Cases and Outbreaks | Measles \(Rubeola\) | CDC](#)

[Measles \(ca.gov\)](#)

U.S. Hospitalizations in 2024

54%

54% of cases hospitalized (82 of 151) for isolation
Or management of complications

Percent of Age Group Hospitalized

Under 5 years: **65% (44 of 68)**
5-19 years: **41% (14 of 34)**
20+ years: **49% (24 of 49)**

U.S. Cases in 2024

Total cases

151

Age

Under 5 years: **68 (45%)**
5-19 years: **34 (23%)**
20+ years: **49 (32%)**

Vaccination Status

Unvaccinated or Unknown: **83%**
One MMR dose: **12%**
Two MMR doses: **5%**

MMR Doses Before International Travel

Infants under 12 months old who are traveling

- Get **an early dose at 6 through 11 months**
- Follow the recommended schedule and get another dose at 12 through 15 months and a final dose at 4 through 6 years

Children over 12 months old

- Get **first dose immediately**
- Get second **dose 28 days after first dose**

Teens and adults with no evidence of immunity*

- Get **first dose immediately**
- Get second **dose 28 days after first dose**

* Acceptable evidence of immunity

- Written documentation of adequate vaccination
- Lab evidence of immunity
- Lab confirmation of disease
- Birth in the US before 1957

New pentavalent meningococcal vaccine

- Protects against *N. meningitidis* serogroups A, B, C, W, and Y.
- Licensed for use among persons aged 10–25 years.
- MenACWY-TT/MenB-FHbp [Penbraya, Pfizer] may be administered to those aged ≥ 10 years when both MenACWY and MenB are indicated at the same visit.
- Remember that MenB formulations are not interchangeable.

[Use of the Pfizer Pentavalent Meningococcal Vaccine Among Persons Aged \$\geq 10\$ Years: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023 | MMWR \(cdc.gov\)](#)

[VFC Program Clinical Letter for MenABCWY \(Penbraya\)](#)

Fall Preview



GET THE FACTS COVID-19, Flu and RSV in Children

In the US, more than **15 million children** have tested positive for COVID-19 since the start of the pandemic. But COVID-19 isn't the only infection we need to look out for.



COVID-19

Caused **22,000**
hospitalizations and



FLU

Caused **20,000**
hospitalizations and



RSV

Causes **58,000-80,000**
hospitalizations and



**Vaccines can protect children
and their families against all
of these severe infections.**

**Protect your home against unwanted
'intruders' this season by getting vaccinated.**



Go to vaccines.gov to check your
eligibility for vaccines and to find
vaccine appointments near you.



Documentation for School Entry and California Immunization Registry-Medical Exemption (CAIR-ME)

Louise McNitt, MD



Documentation for School

- The only documentation schools can accept to show that children meet immunization requirements:
 - Immunization records
 - A medical exemption issued in CAIR-ME
 - Schools cannot accept lab reports or letters from doctors
- Conditional admission
 - For children who are catching up on vaccines or have not completed a series
 - Must have received at least one dose of the required vaccine and not be overdue for any doses
 - Medical exemption issued in CAIR-ME is not needed unless there is a *medical* reason for delaying vaccination

Conditional Admission

- Conditional admission schedule aligns with ACIP catchup schedule: [Catch-up Immunization Schedule for Children, Birth-18 Years | CDC](#)

CALIFORNIA IMMUNIZATION REQUIREMENTS FOR K-12TH GRADE (continued)

CONDITIONAL ADMISSION SCHEDULE FOR GRADES K-12

Before admission a child must obtain the first dose of each required vaccine and any subsequent doses that are due because the period of time allowed before exclusion has elapsed.

DOSE	EARLIEST DOSE MAY BE GIVEN	EXCLUDE IF NOT GIVEN BY
Polio #2	4 weeks after 1st dose	8 weeks after 1st dose
Polio #3 ¹	4 weeks after 2nd dose	12 months after 2nd dose
Polio #4 ¹	6 months after 3rd dose	12 months after 3rd dose
DTaP #2	4 weeks after 1st dose	8 weeks after 1st dose
DTaP #3 ²	4 weeks after 2nd dose	8 weeks after 2nd dose
DTaP #4	6 months after 3rd dose	12 months after 3rd dose
DTaP #5	6 months after 4th dose	12 months after 4th dose
Hep B #2	4 weeks after 1st dose	8 weeks after 1st dose
Hep B #3	8 weeks after 2nd dose and at least 4 months after 1st dose	12 months after 2nd dose
MMR #2	4 weeks after 1st dose	4 months after 1st dose
Varicella #2	Age less than 13 years: 3 months after 1st dose	4 months after 1st dose
	Age 13 years and older: 4 weeks after 1st dose	8 weeks after 1st dose

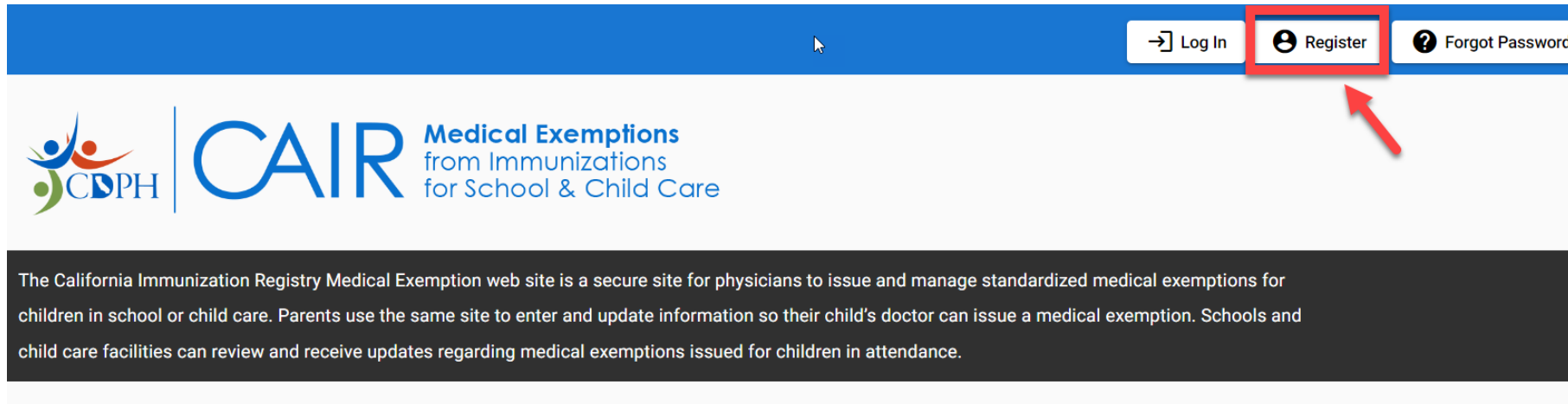
- Three doses of polio vaccine meet the requirement if one dose was given on or after the fourth birthday. If polio #3 is the final required dose, polio #3 should be given at least six months after polio #2.
- If DTaP #3 is the final required dose, DTaP #3 should be given at least six months after DTaP #2, and pupils should be excluded if not given by 12 months after second dose. Three doses meet the requirement if at least one dose of Tdap, DTaP, or DTP vaccine was given on or after the seventh birthday. One or two doses of Td vaccine given on or after the seventh birthday count towards the requirement.

CAIR-ME Basics

- Starting January 1, 2021, all new medical exemptions (MEs) must be issued using [CAIR-ME](#) ([California Health and Safety Code Section 120372](#))
- CAIR-ME is a web-based application that allows:
 - Physicians to create and issue a printed version of a ME
 - Schools to view, check the status, and export ME data for children that attend the school
 - LHDs to view, check the status and export ME data for children that live or attend school in the jurisdiction, for schools and childcare in the jurisdiction, and of physicians that practice in the jurisdiction

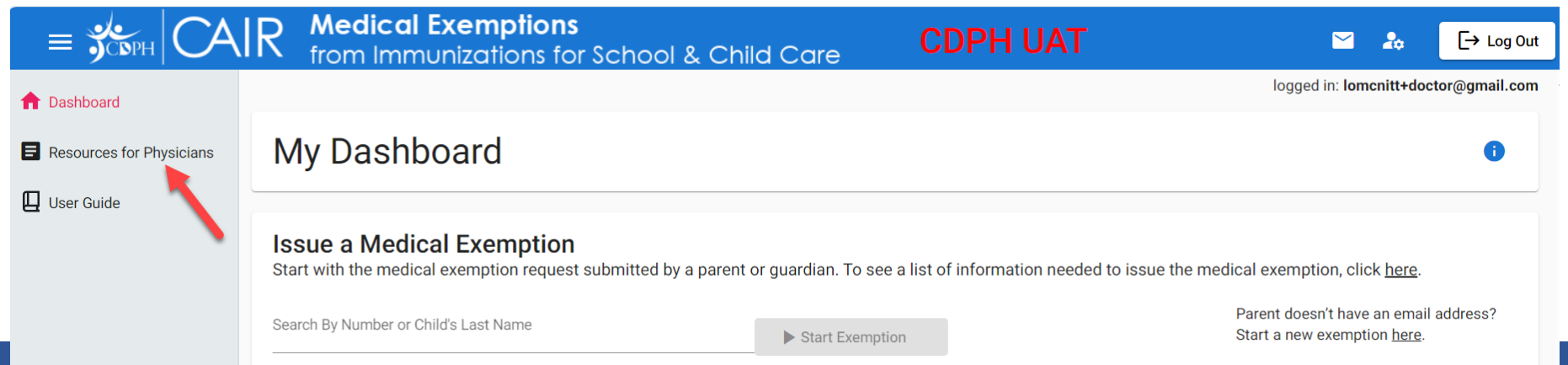
Register for a CAIR-ME Account

- Go to <https://cair-me.cdph.ca.gov/home>
- Click on the Register button
- Only MDs and DOs licensed in California can create a physician account and issue medical exemptions
 - Registration requires medical license verification



ME Requirements

- Per [California Health and Safety Code Section 120372](#), MEs must meet applicable Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices (ACIP), and American Academy of Pediatrics (AAP) criteria
 - [ACIP General Best Practice Guidelines for Immunization | CDC](#)
 - [Pinkbook Course Book: Epidemiology of Vaccine Preventable Diseases | CDC](#)
 - [Red Book Online | American Academy of Pediatrics \(aap.org\)](#)
 - “Resources for Physicians” within CAIR-ME



More Information

[Exemption FAQ page:](#)

Exemption FAQs

Medical Exemptions (MEs)

Resources

- [Parent CAIR-ME Flyer \(PDF\)](#)
- [CAIR-ME Physician Webinar | Slides \(PDF\)](#) ← **Coming soon: physician registration guide**
- [Pre-2020 Medical Exemptions by Disciplined Physicians \(PDF\)](#)
- [School and Child Care Webinar Presentation \(PDF\) \(4/14/2021\)](#)
- [Revoked Medical Exemptions from Immunizations Appeal Process \(PDF\)\(CHHSA\)](#)

[Parent and Physician ME Guide \(ca.gov\)](#)

Obtaining a Medical Exemption: Guide for Parents and Physicians



New medical exemptions for school and child care entry must be issued through the [California Immunization Registry - Medical Exemption \(CAIR-ME\) website \(cair-me.cdph.ca.gov\)](#).

Medical exemptions can only be issued by doctors (MDs or DOs) licensed in California and must meet applicable Centers for Disease Control and Prevention (CDC), Advisory Committee on Immunization Practices, and American Academy of Pediatrics (AAP) criteria.

To Obtain a Medical Exemption for School/Child Care Entry:

1. The parent creates an account in [CAIR-ME \(cair-me.cdph.ca.gov\)](#) and applies for an exemption. They will receive a medical exemption application number.
2. [Instructions to Request a Medical Exemption \(bit.ly/MERequestHowTo\)](#)
[Instructions to Request a Medical Exemption Spanish \(bit.ly/SpanishMERequestHowTo\)](#)
3. The parent provides the medical exemption application number to the child's doctor.
4. If the doctor doesn't have a [CAIR-ME](#) account, the doctor registers in CAIR-ME, then logs in, searches for the child, and issues the medical exemption.
5. After issuing the medical exemption, the doctor provides a **printed or electronic copy** of the medical exemption to the parents. Parents are not able to print out a medical exemption.
6. The parent submits a copy of the medical exemption to the school or child care facility.
7. The school or child care facility confirms that the medical exemption meets the requirements by ensuring that the information on the exemption is correct and checking the status in CAIR-ME.



Note: The requirement to issue all new medical exemptions through CAIR-ME includes exemptions for children who have had documented chickenpox disease.

Resources:

[Shots for School Website \(cdph.ca.gov/ShotsForSchool\)](#)
[Medical Exemption FAQs \(bit.ly/ExemptionFAQs\)](#)

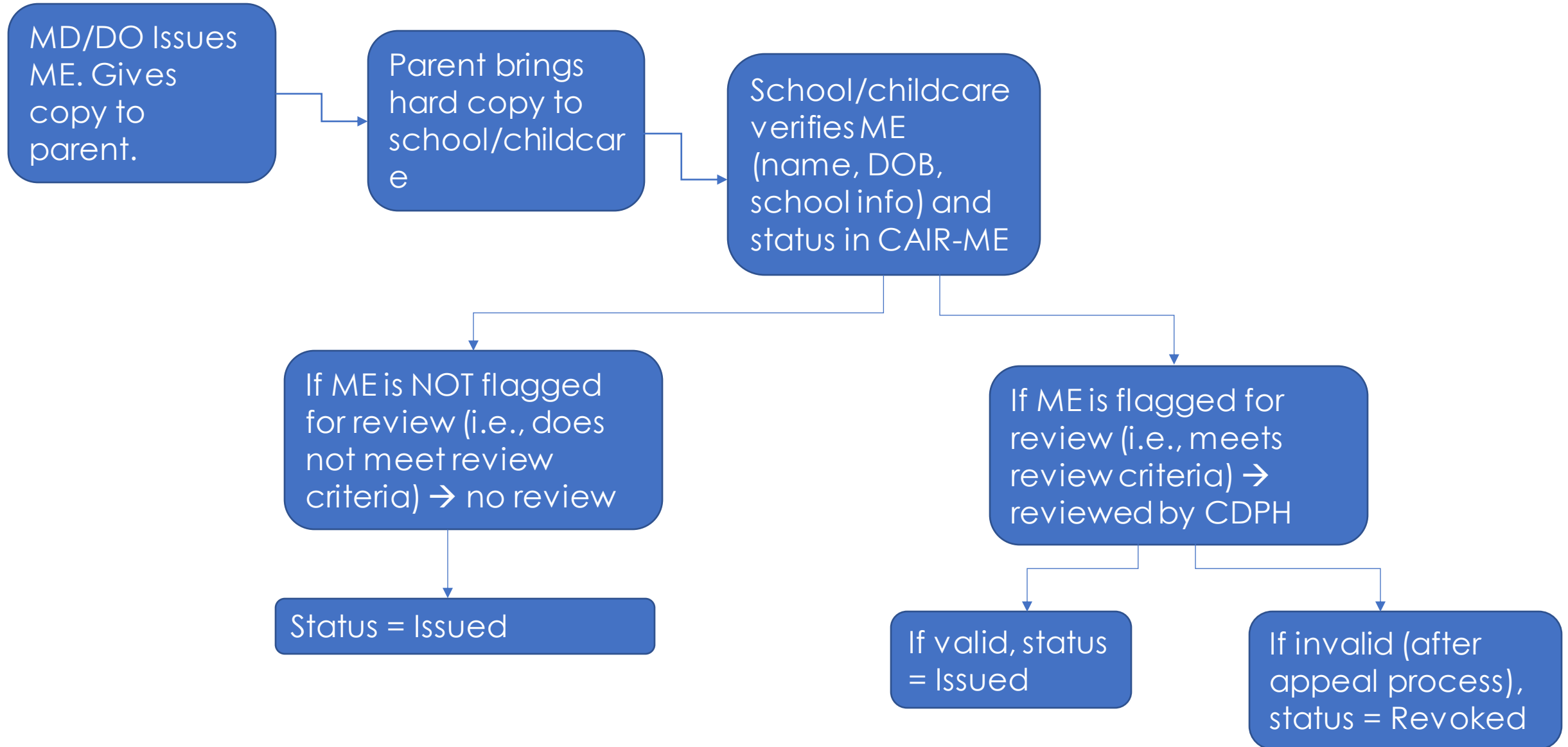
Physician User Guide

The screenshot shows the CAIR Medical Exemptions web application. The header includes the CDPH logo, the title "CAIR Medical Exemptions from Immunizations for School & Child Care", and the "CDPH UAT" label. A navigation sidebar on the left contains links for "Dashboard", "Resources for Physicians", and "User Guide". The main content area is titled "My Dashboard" and includes a section "Issue a Medical Exemption" with instructions to start with a request from a parent or guardian. There is a search bar labeled "Search By Number or Child's Last Name" and a "Start Exemption" button. A note at the bottom right states: "Parent doesn't have an email address? Start a new exemption [here](#)."

ME Review Process

- Not all MEs are reviewed by CDPH
- CDPH is required to review exemptions in CAIR-ME when:
 - A school/childcare immunization rate falls below 95% or
 - A school/childcare facility does not report vaccination rates to CDPH
 - A doctor writes 5 or more medical exemptions per calendar year
- School data is entered into CAIR-ME once yearly in May/June
- MEs may not come up for review until variable amounts of time after they are issued

ME Review Process



ME Review Process - Appeals

- If ME is revoked by CDPH, parent/guardian may file an appeal to the California Health and Human Services Agency (CHHS) within 30 days
- Parent/guardian may submit additional documentation to substantiate the need for a medical exemption
- MEs revoked by CDPH are reviewed by an independent physician review panel
- Determination made by independent physician review panel is final

Notifications from CAIR-ME

- Issuing physician will receive an email notification from CAIR-ME when:
 - Additional documentation is required for CDPH review
 - ME is CDPH revoked
 - ME is permanently revoked (no appeal filed or appeal denied)
- Please ensure you are able to receive notifications from CAIR-ME

Questions?

- Childcare/School Requirements: shotsforschool@cdph.ca.gov
- Medical Exemptions: medicalexemptions@cdph.ca.gov

Reminders Regarding VFC Policies on Inventory in Preparation for the 2024-2025 Fall/Winter Respiratory Season

Claudia Aguiluz



COVID-19 Vaccine Supply Post USG COVID-19 Program Sunset

- VFC providers were allowed a flexible, time-limited ramp-up period during the introduction of COVID-19 doses into the VFC Program to meet the private inventory requirement for COVID-19 vaccines.
 - During a limited time, until March 31, 2024, CDC did not require VFC providers to meet the private inventory minimum requirements for COVID-19 vaccine if they do not intend to vaccinate their private pay patients.
- VFC providers are now required to meet the private inventory requirement.
- VFC providers who serve only Medi-Cal eligible patients and no privately insured children are not required to privately purchase COVID-19 vaccine.



RSV Vaccine Introduction into VFC



Special Considerations for Nirsevimab

- VFC providers were allowed a flexible, time-limited ramp-up period to meet the private inventory requirement for nirsevimab during the 2023-2024 RSV season.
- During this time, CDC does not require VFC providers to meet the private inventory minimum requirements for nirsevimab, if they do not intend to vaccinate their private pay patients.
- VFC providers are required to meet the private inventory requirement **no later than August 1, 2024.**

2024-2025 Nirsevimab Vaccine Supply

- Private Supply
 - Sanofi's forecasting process is intended to determine provider need
 - Providers must complete a reservation process for private doses
- VFC Vaccine Supply
 - No pre-booking needed for Fall 2024
 - Doses will be made available to providers as soon as supply is available. Estimated timeline: September 1, 2024
 - Will receive allocations from CDC every 2 weeks to fulfill provider orders.

CA VFC Vaccine Borrowing Policy

- For VFC providers who maintain private stock of COVID-19, RSV, and any other VFC supplied vaccine and vaccinate privately insured children, bidirectional borrowing of COVID-19 vaccine is not allowed.



Resources

Terisha Gamboa, MPH
Josh Pocus



General IZ Resources for Parent/Guardian Education

Found on EZIZ website:

- [Answers to Parents/Guardians' FAQs](#)
- [Immunizations Brochure for Parents \(IMM-234\)](#)
- [Immunization Block schedule \(IMM-395\)](#)



Immunizations:

Are one of the greatest achievements of medicine. They have been so successful, many parents have never seen most of the illnesses and complications that vaccines prevent. But these diseases still exist. Your child needs immunizations to be protected from them.

Immunization Schedule for:

Age	6 months and older	11-12 years	16 years
Birth	✓	✓	✓
2 months	✓	✓	✓
4 months	✓	✓	✓
6 months	✓	✓	✓
12 months	✓	✓	✓
15 months	✓	✓	✓
18 months	✓	✓	✓
4-6 years	✓	✓	✓

Parents

Protect your little one with immunizations.

Immunization Timing 2024

Suggested schedule to meet recommendations on time. [Refer to web version.](#)

Birth		6 months - 18+ years	
HepB ¹		COVID-19 vaccine(s) ⁵	Flu vaccine, every fall ⁷
Age	Interval from previous dose	Age	Interval from previous dose
Birth		2 months	
2 months		4 months	
4 months		6 months	
6 months		12 months	
12 months		15 months	
15 months		18 months	
18 months		4-6 years	
4-6 years		11-12 years	
11-12 years		16 years	

Birth

HepB¹

RSV² (age: 0-8 months)

6 months - 18+ years

COVID-19 vaccine(s)⁵

Flu vaccine, every fall⁷

Age 2 months

DTaP (Diphtheria, Tetanus, Pertussis)

Polio (IPV)

HepB³ (age: 1-2 months)

Hib (Hib meningitis)

PCV (Pneumo)

RV⁴ (Rotavirus)

Age 4 months

DTaP

Polio (IPV)

HepB³ (if 1st dose given at 2 months)

Hib

PCV

RV⁴

Age 6 months

DTaP

Polio (age: 6-18 months)

HepB³ (age: 6-18 months)

Hib⁵

PCV

RV⁴ (if Rotateq used for doses 1 or 2)

Age 12 months

HepA⁸ (age: 12-23 months)

MMR^{9,10} (ages 12-15 months)

Var¹⁰ (age: 12-15 months)

Hib (age: 12-15 months)

PCV¹¹ (age: 12-15 months)

Age 15 months

DTaP¹²

Age 18 months

HepA

Age 4-6 years

DTaP (IPV)

Polio (IPV)

MMR^{9,10}

Varicella¹⁰

Age 11-12 years

HPV¹³ (2 doses, can start at age 9)

MenACWY (MCV4)

Tdap

Age 16 years

MenACWY (MCV4)

MenB¹⁴

California Kids Love them. Immunize them.

California Department of Public Health, Immunization Branch • EZIZ.org IMM-395 (12/23)

Getting Ready for School or Childcare

Found on [ShotsforSchool.org](https://shotsforschool.org)

- Required Immunizations for [School Entry \(IMM-222\)](#)

[Spanish](#) | [Arabic](#) | [Armenian](#) | [Cambodian](#) | [Chinese](#) | [Farsi](#) |
[Hmong](#) | [Korean](#) | [Russian](#) | [Tagalog](#) | [Ukrainian](#) | [Vietnamese](#)

- Required Immunizations for [Pre-Kindergarten/Child Care \(IMM-222\)](#)

[Spanish](#) | [Arabic](#) | [Armenian](#) | [Cambodian](#) | [Chinese](#) | [Farsi](#) |
[Hmong](#) | [Korean](#) | [Russian](#) | [Tagalog](#) | [Vietnamese](#)

Parents/Guardians – Are Your Kids Ready for School? REQUIRED IMMUNIZATIONS FOR SCHOOL ENTRY

Please bring your child's immunization records with you at the time of registration. You may view and print a digital copy of your child's California vaccine record at: MyVaccineRecord.CDPH.CA.gov

Students Entering Transitional Kindergarten or Kindergarten Need Records of:

- ☐ **Diphtheria, Tetanus, and Pertussis (DTaP, DTP, Tdap or Td) — 5 doses**
4 doses OK if one was given on or after 4th birthday;
3 doses OK if one was given on or after 7th birthday.
- ☐ **Polio (IPV or OPV) — 4 doses**
3 doses OK if one was given on or after 4th birthday. Oral polio vaccine (OPV) doses given on or after April 1, 2016, do not count.
- ☐ **Hepatitis B — 3 doses**
- ☐ **Measles, Mumps, and Rubella (MMR) — 2 doses**
Both doses must be given on or after 1st birthday.
- ☐ **Varicella (Chickenpox) — 2 doses**

New and Transfer Students Entering TK/K-12th Grade Need Records of:

- ☐ **All immunizations listed above**
For 7th-12th graders: at least 1 dose of pertussis-containing vaccine is required on or after 7th birthday. Hepatitis B vaccine is required for any grade, except for entry into 7th grade.

Students Starting 7th Grade Need Records of:

- ☐ **Tetanus, Diphtheria, Pertussis (Tdap) — 1 dose**
- ☐ **Varicella (Chickenpox) — 2 doses**

What other immunizations should I ask my health care provider about?

Parents' Guide to Immunizations Required for Pre-Kindergarten (Child Care)

Parents must show their child's immunization Record as proof of immunizations (shots) before starting pre-kindergarten (child care) and at each age checkpoint after entry:

Age at Entry/checkpoint	Required Doses
2-3 Months	1 Polio 1 DTaP 1 Hep B 1 Hib
4-5 Months	2 Polio 2 DTaP 2 Hep B 2 Hib
6-14 Months	2 Polio 3 DTaP 2 Hep B 2 Hib
15-17 Months	3 Polio 3 DTaP 2 Hep B 1 Hib* (on or after 1st birthday) 1 Varicella 1 MMR (on or after 1st birthday)
18 Months-5 Years	3 Polio 4 DTaP 3 Hep B 1 Hib* (on or after 1st birthday) 1 Varicella 1 MMR (on or after 1st birthday)

* One Hib dose must be given on or after the 1st birthday regardless of previous doses.
Required only for children younger than 5 years old.

Polio = inactivated polio vaccine (IPV)
(oral polio vaccine (OPV) does not count)
DTaP = diphtheria toxoid, tetanus toxoid,
and acellular pertussis vaccine
Hep B = hepatitis B vaccine

Varicella = chickenpox vaccine
Hib = *Haemophilus influenzae*, type B vaccine
MMR = measles, mumps, and rubella vaccine

Immunizations, make sure to also ask about other
shots A, COVID-19, and the annual flu vaccine.
as (HPV) vaccine to protect against certain
their age (bit.ly/CDCVaccinesByAge) and
need).
Public Health • Immunization Branch • ShotsForSchool.org

7th Grade and Adolescent IZ Flyers

Ready For 7TH Grade?



Get the whooping cough shot and 2 chickenpox shots if you haven't had them yet!

Ask your doctor for any other recommended vaccines.

The Tdap vaccine and 2 doses of chickenpox vaccine are required for all 7TH graders. Your school will need your vaccine records. Talk with your doctor today.


[ShotsForSchool.org](https://shotsforschool.org)

IMM-1039 (10/22)

7th Grade (IMM-1039)

Vaccines for Your Preteen

11-12 years old to help them stay healthy through adolescence and beyond



Tdap protects against tetanus, diphtheria, and pertussis (whooping cough). Whooping cough can cause vomiting, gasping for air, and trouble sleeping. It may last for months and is very contagious. This vaccine is required for 7TH grade entry in California.

HPV (human papillomavirus) vaccine series is recommended starting at age 9. It prevents warts and several cancers of the reproductive system, as well as throat and mouth cancer. HPV vaccine works best when given during the preteen years. Preteens who are vaccinated earlier need only two shots instead of three.

Meningococcal vaccines protect against bacterial meningitis, a very serious infection that can lead to brain damage, arm and leg amputations, kidney damage, and death. Preteens need to get immunized now and again at age 16.

Flu (influenza) vaccine is needed every year. Flu is much more serious than the common cold. Even healthy young people can get the flu. Children with chronic conditions like asthma and diabetes are especially at risk for pneumonia or even death.

Chickenpox vaccine protects against more than just an itchy rash. The disease can cause pneumonia or serious skin infections. Preteens need two shots before starting 7TH grade.

COVID-19 vaccine can protect against serious illness in everyone 6 months and up, including preteens. Preventing COVID-19 infection can mean less time away from school, sports, and social activities.

TO DO:

- ☐ Tdap
- ☐ HPV
- ☐ MENINGOCOCCAL
- ☐ FLU
- ☐ CHICKENPOX
- ☐ COVID-19

? Ask the Doctor

▶ Does my child need any other catch-up shots (e.g., MMR, chickenpox, and hepatitis B)?	▶ Will any other shots be needed later on?
▶ Are there any side effects from these vaccines?	▶ Can I get an updated shot record?
▶ Which vaccines are required for school, and can you give me the documentation I need?	▶ Can I schedule my child's next HPV shot(s) today?

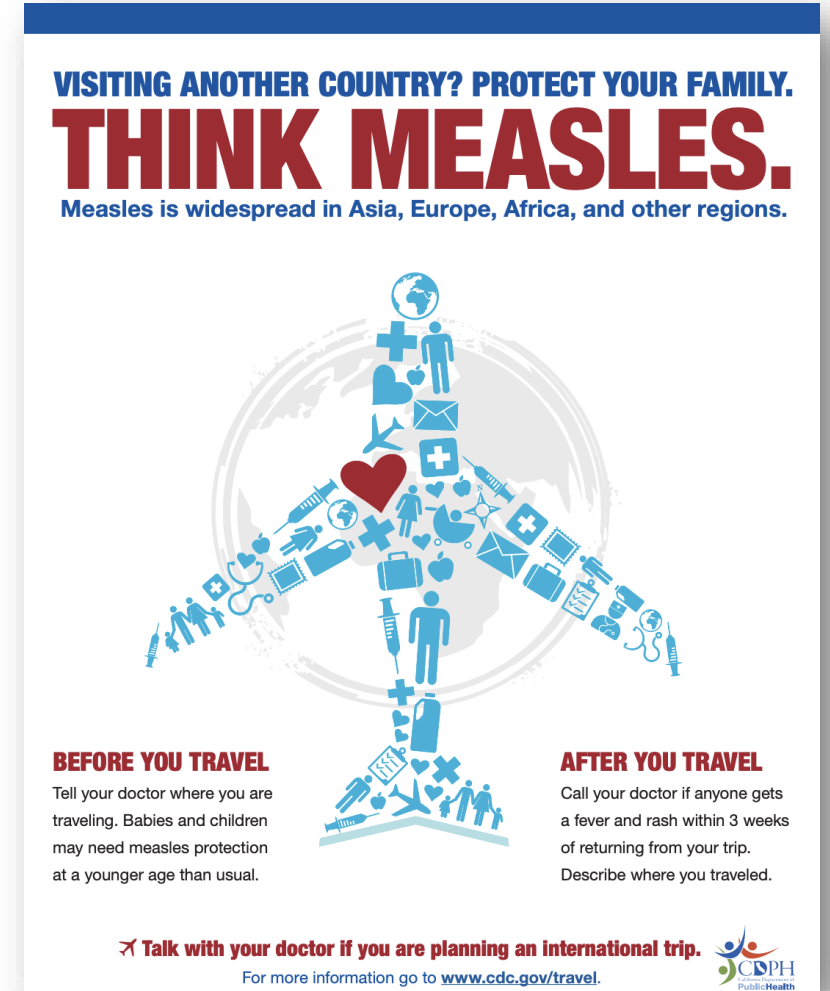
ShotsForSchool.org
California Department of Public Health, Immunization Branch
This publication was supported by Grant Number H23/CC1922507 from the Centers for Disease Control and Prevention (CDC).

IMM-1054 (8/23)

Preteen Vaccines (IMM-1054)

Summer Travel Advisory Materials


- [Measles resources](#)
- [Immunizations for travel](#) (CDC)
- [ShotbyShot.org](#) – Mobius's story with measles



Traveling and Measles (IMM-1046)

[Russian](#) | [Spanish](#) | [Tagalog](#) | [Ukrainian](#) | [Other Languages](#)

Meningococcal Job Aids



EZIZ

ENHANCED BY Google

A one-stop shop for immunization

- Home
- Vaccine Programs
- Vaccine Management
- Storage Units
- Temperature Monitoring
- Training & Webinars
- Clinic Resources
- Patient Resources

Schedules and Recommendations

Childhood and Adolescent

- CDC's Childhood and Adolescent Immunization Schedule
- Immunization Schedule Using Combination Vaccines
- Simplified Block Timing Schedule | Spanish
- Meningococcal Vaccine Timing: Routine | High-risk**
- Serogroup B Meningococcal Vaccines: Information for Parents | Providers
- Pneumococcal Vaccine Timing Tool for Children
- Nirsevimab (Beyfortus) Guide to Prevent Severe RSV in Infants and Toddlers
- Respiratory Disease Immunization Timing for Children

Adult

Schedules and Recommendations (EZIZ)

Additional Resources:

- [Serogroup B Meningococcal \(MenB\) Vaccines \(EZIZ\)](#)
- [Immunization Promotional Materials for Staff and Patients \(EZIZ\)](#)

For Health Professionals [View web version of this schedule.](#)

Meningococcal Vaccines for Adolescents & Young Adults: Routine Risk¹

Routine MenACWY^{2,3} for 11-18 years **2 Doses**

MenACWY
MenQuadfi® or Menveo®

8 weeks min.

MenACWY
MenQuadfi® or Menveo®

Ages 11 or 12 years Age 16 years

Catch-up⁴:

- Ages 13-15 years: 1 dose now and booster at age 16-18 years.
- Ages 16-18 years: 1 dose

Shared Clinical Decision-Making MenB² for 16-23 years **2 Doses**

Preferred age is 16-18 years

MenB
Bexsero®

At least 1 month

MenB
Bexsero®

MenB
Trumenba®

At least 6 months

MenB⁵
Trumenba®

- If dose 2 is administered earlier than 6 months, administer 3rd dose at least 4 months after dose 2.

Use the same brand of MenB vaccine for each dose in the series.

Pentavalent Vaccine (MenABCWY)² Suggested Dosing for 11-23 years **3 Doses**

MenACWY
MenQuadfi® or Menveo®

8 weeks min.

MenABCWY
Penbraya

At least 6 months

MenB⁵
Trumenba®

Ages 11 or 12 years Age 16 years

If a patient receives Penbraya, which includes Trumenba, subsequent MenB dose(s) must be Trumenba since MenB brands are not interchangeable

Notes:

- For **high-risk populations** (increased exposure to meningococcal disease, HIV infection, complement deficiencies or asplenia), (EZIZ.org/assets/docs/IMM-1218.pdf) (CDC.gov/mmwr/volumes/69/rr/rr6909a1.htm#T3_down)
- MenACWY and MenB vaccines each protect against different serogroups. They may be given at the same visit. If a patient is receiving MenACWY and MenB vaccines at the same visit, **MenABCWY** may be given instead.
- MenACWY (MCV4) vaccines protect against serogroups A, C, W-135, and Y.
- One dose of MenACWY is also recommended for previously unvaccinated or incompletely vaccinated first-year college students living in residence halls and military recruits and may be administered to persons aged 19-21 yrs. who have not received a dose after their 16th birthday.
- A two-dose series is recommended for persons who are not at increased risk for meningococcal disease. A three-dose (0, 1-2, and 6 months) series is recommended for **persons at increased risk, including during outbreaks of serogroup B disease** (EZIZ.org/assets/docs/IMM-1218.pdf).

California Department of Public Health, Immunization Branch

EZIZ.org IMM-1217 (6/24)

Meningococcal Vaccines
Routine Schedule – updated!




Meningococcal Job Aids cont.

Vaccine Fact Sheets

- MenACWY (MenQuadfi[®], Menveo[®])

★ MenABCWY (PenbrayaTM) – new! →

- MenB (Bexsero[®], Trumenba[®])



EZIZ

A one-stop shop for immunization

Vaccine Fact Sheets

Download these quick-reference fact sheets that provide information about routine schedules, minimum intervals, approved for use age ranges, administration routes, billing codes, storage, and more.

- COVID-19
 - COVID-19 Vaccine Infant/Toddler (6M-4Y), 2023-2024 Formula
 - COVID-19 Vaccine Pediatric (5-11Y), 2023-2024 Formula
 - COVID-19 Vaccine Adolescent/Adult (12Y+), 2023-2024 Formula
- DTaP Combination
 - DTaP-IPV-Hib-HepB combination vaccine (VAXELISTM)
 - DTaP (Daptacel[®], Infanrix[®])
 - DTaP-HepB-IPV combination vaccine (Pediarix[®])
 - DTaP-IPV combination vaccine (Kinrix[®], QuadracelTM)
 - DTaP-IPV/Hib combination vaccine (Pentacel[®])
- Hepatitis
 - Hepatitis A (Havrix[®], VAQTA[®])
 - Hepatitis B (Recombivax HB[®], Engerix-B[®], PreHevbrio, Heplisav-B[®])
 - Hepatitis A and B combination vaccine (Twinrix)
- Hib (ActHIB[®], PedvaxHIB[®], Hiberix[®])
- HPV (Gardasil[®])
- Influenza vaccine identification guide (not actual fact sheet)
- IPV (IPOL[®])
- Meningococcal
 - MCV4 (Menveo[®], MenQuadfi[®])
 - MenABCWY (PenbrayaTM)
 - MenB (Bexsero[®], Trumenba[®])

Contact VFC

Phone: (877) 243-8832
Hours:
Mon-Thurs, 9AM-4:30PM
Friday, 9AM-4PM
Send us an email
Fax: (877) 329-9832

► VFC Field Representatives
► Find VFC providers
► Sign up for EZIZ emails
► Frequently Asked Questions

Vaccine Fact Sheet: MenACWY-MenB



Topic	Penbraya TM
Manufacturer	Pfizer Detailed Prescribing Information
Protects Against	Invasive meningococcal disease (IMD) caused by <i>N. meningitidis</i> * serogroups A, B, C, W, and Y.
Routine Schedule & Intervals	<p>ACIP recommends MenACWY-MenB may be used when both MenACWY and MenB are indicated at the same visit for:</p> <ul style="list-style-type: none">• 16 - 18 years (routine) when shared clinical decision-making favors MenB.• 10 - 25 years at increased risk:<ul style="list-style-type: none">◦ persistent complement deficiencies, taking complement inhibitors, and anatomic or functional asplenia, including sickle cell disease. <p>Suggested routine dosing:</p> <ul style="list-style-type: none">• dose 1 (11-12 yrs) = Menveo (MenACWY-CRM) or MenQuadfi (MenACWY-TT)• dose 2 (16-18 yrs) = Penbraya (MenACWY-TT/MenB-FHbp)• dose 3 (16-18 yrs) = Trumenba (MenB-FHbp) <p>The MenB component in Penbraya is Trumenba (MenB-FHbp). MenB brands are not interchangeable. If a patient receives PenbrayaTM (MenABCWY) for MenACWY dose 2 and MenB dose 1, the MenB series must be completed with Trumenba at least 6 months later.</p> <p>Refer to: CDPH Meningococcal Vaccine Timing Guide: Routine Risk High Risk</p>
Minimum intervals	6-month interval between doses
Approved ages	10 years - 25 years of age
Administration	Intramuscular (IM) injection
Packaging	<p>Vaccine is packaged in cartons of 1, 5, and 10 kits. One kit includes one vial of Lyophilized MenACWY Component (a sterile white powder), a prefilled syringe containing the MenB Component and a vial adapter.</p> <p>To prepare vaccine for administration, reconstitute the Lyophilized MenACWY Component with the MenB Component. (Approximately 0.5mL each dose after reconstitution).</p>
Storage	<p>Before reconstitution: Refrigerate between 36°F and 46°F (2°C to 8°C). Store carton horizontally to minimize the time necessary to resuspend the MenB component. Do not freeze. Discard if the carton has been frozen.</p>

California Department of Public Health, Immunization Branch

IMM-1533 (5/16/24)

National Immunization Awareness Month (CDC)

Annual observance in **August** for people of all ages to stay up to date on routine vaccines.



Move to myCAvax - Provider Webpages


EZIZ.org homepage

Alerts!



VFC vaccine ordering and management is now live at myCAvax!

- **06/10/24:** Vaccine Coordinators receive an email prompting them to login to [myCAvax](#) and set up accounts! [Read more.](#)
- Use myCAvax to place vaccine orders and report transfers, waste, returns and shipping incidents!
- Providers still have read-only access to [myVFCvaccines.org](#).
- Learn more about [myCAvax move](#), recorded trainings and FAQs!



ENHANCED BY Google

A one-stop shop for immunization training and resources.

Home

Vaccine Programs

Vaccine Management

Storage Units

Temperature Monitoring

Training & Webinars

Clinic Resources

Patient Resources

Contact VFC

Phone: (877) 243-8832

Hours:

Mon-Thurs, 9AM-4:30PM

Friday, 9AM-4PM

Send us an email



Fax: (877) 329-9832

[▶ VFC Field Representatives](#)

[▶ Find VFC providers](#)

[▶ Sign up for EZIZ emails](#)

[▶ Frequently Asked Questions](#)



California Vaccine Management System

VFC vaccine ordering moved to myCAvax on June 10, 2024!

The Vaccines for Children (VFC) Program moved its vaccine ordering and provider management system to myCAvax, on June 10, 2024. Use myCAvax to view/submit vaccine orders and report transfers, waste, returns, temperature excursions and shipping incidents!

Reminder: The following ordering policies/procedures remain the same:

- Report doses administered and on hand inventory on each order
- Timeframes for order submission and order processing will not change
- Vaccine Coordinators receive email confirmations once orders are approved and are being filled by McKesson or directly (Merck/Pfizer)
- Provider can request shipping labels for returning doses

Log in to myCAvax!

As of June 10, 2024, primary and backup vaccine coordinator received a myCAvax welcome email on June 10, 2024, which will ask them to finish setting up their myCAvax account. (Unique login credentials will be created using Vaccine Coordinators information from MyVFCvaccines).

- Log in to myCAvax to familiarize yourself with all VFC functions now available!
- Submit vaccine orders in myCAvax!
- Attend Office hours as needed.
 - **Note:** Existing myCAvax users will see a new VFC Program tile upon logging in. Access all the new VFC functions available to you there.



Provider Locator Transition (Provider Community)

The VFC Provider Locator Tool is transitioning to My Turn on **Thursday, June 27, 2024** to expand and bring new features. On **Thursday** upon logging in to myCAvax, providers will see a pop-up window (see below) describing the provider locator tool and steps to opt-in.

How to Opt-In

1. Log into myCAvax
2. Navigate to "Provider Locator" page
3. Navigate to the sub-page "My Turn Vaccine Locator Opt-In"
4. For each location, click the blue "Manage Vaccine Locator Form" button
5. Fill in the fields and press submit

NOTE: To opt-out, click the "manage form" button for the location and select "No we do not accept new patients." Then submit.

New Provider Pop-Up Reminder

Reminder: Update My Turn Vaccine Locator Information (Public-facing)

Please review and update your location information for the [My Turn Vaccine Locator](#) if needed. The public-facing Vaccine Locator page helps patients find a location based on its proximity, vaccination services, and the patient's age and insurance status.

To update or opt in locations for the My Turn Vaccine Locator, click the **View Vaccine Locator Opt-in** button below, then click the **Manage Vaccine Locator Form** link and complete the information form for each location. If no updates are needed, please click cancel.

CancelView Vaccine Locator Opt-In

The screenshot shows the myCAvax interface. At the top, there's a navigation bar with links: Home, My Programs, My Turn (with a dropdown arrow), Vaccine Orders, Program Locations, and More (with an upward arrow). On the right, a user profile icon is visible. A dropdown menu is open under 'More', showing options: Enrollment, Reports, myCAvax Dashboard, **Provider Locator** (highlighted with an orange box and labeled '2'), and Knowledge Center. The main content area is titled 'Provider Locator' and includes instructions. A link 'My Turn Vaccine Locator Opt-In' is highlighted with an orange box and labeled '3'. Below this, there's a section 'Opt-in to My Turn Vaccine Locator (Public-facing)' with a description. Further down, a 'My Locations' section contains a search filter 'Search by Locator Status' with a dropdown set to 'Inactive' and buttons for 'Search' and 'Reset'. A table lists locations, with the first row showing 'GVHC - 889 Abrego St - HS' and 'Inactive'. To the right of the table, a dropdown menu is open, showing 'Vaccine Locator' and a link 'Manage Vaccine Locator Form' (highlighted with an orange box and labeled '4').



My Turn Locator (Provider Community)

With Release 50, providers will be able to use the new 'Provider Locator' feature in myCAvax to find nearby providers by entering their zip codes and filtering by program or provider type.

Find Providers near you.

Provider Locator
Find a location to transfer your vaccines

Search by program
VFC

Search by provider type
Community Vaccinator

* Zip code
93940

Search radius
20 miles

Search **Reset**

myCAvax California Vaccine Management System

Home My Programs My Turn Vaccine Orders Program Locations Vaccine Inventory **More**

- Enrollment
- Reports
- Provider Locator**
- Knowledge Center
- myCAvax Dashboard
- CAIR Quick Entry
- Upload Records
- View/Edit Records

Provider Locator
To find other providers near you, go to the Provider Locator tab and enter your zip code. You can filter your search by program and/or provider type.

If you want a location to appear on the public-facing My Turn Vaccine Locator, go to the Opt-in tab, click the location's Manage Vaccine Locator Form link, then complete the information form to opt-in.

Provider Locator My Turn Vaccine Locator Opt-In

Find Providers near you.

Provider Locator
Find a location to transfer your vaccines

Search by program
VFC

Search by provider type
Community Vaccinator

* Zip code
93940

Search radius
20 miles

Search **Reset**

GVHC - 889 Abrego St - HS
Community Vaccinator
889 Abrego St, Monterey, CA 93940

Springtime Vaccines
Community Vaccinator
678 Abrego St, Monterey, CA 93940

Map **Satellite**

Map showing various locations in Monterey, CA, including GVHC - 889 Abrego St - HS, Springtime Vaccines, and other community vaccinators. The map also shows landmarks like Monterey High School, Monterey Museum of Art, and San Carlos Cathedral.



My Turn Locator (Public Site)

With Release 50, patients will be able to use the new 'Vaccine Locator' tool, which will replace the Walk-in page and include all My Turn Walk-in clinics as well as other providers that opt into this experience.

Find a location
Use the filters to find locations that offer the vaccines and services you need.

Search by vaccine: COVID-19, HPV, MMR
Search by insurance status: Uninsured
Search by age group: Pediatric

☒ Find a walk-in clinic

Enter your zip code below to find locations near you.

Zip Code: 94541
Search Radius: 20 miles
Search **Clear**

St. John's Well Child and Family Ctr - Magnolia
1401 Golf Course Road, Hayward, CA 94541
Mon - 09:00 AM - 03:00 PM
Tues - 09:00 AM - 03:00 PM
Wed - 09:00 AM - 03:00 PM
Thu - 09:00 AM - 03:00 PM
Fri - 09:00 AM - 03:00 PM
1-800-555-1234
Clickmap: HPV, MMR
See all
Please contact the clinic to confirm the vaccine(s) you need are available.
Learn more

St. John's Well Child and Family Ctr - LA
1400 Golf Course Road, Hayward, CA 94541
Dates available: 7/12 - 8/12
Mon - 09:00 AM - 03:00 PM
Tues - 09:00 AM - 03:00 PM
Wed - 09:00 AM - 03:00 PM
Thu - 09:00 AM - 03:00 PM
Fri - 09:00 AM - 03:00 PM
1-800-555-1234
COVID-19, MMR

Map Satellite
Google

Find a location
Use the filters to find locations that offer the vaccines and services you need.

☐ Find a walk-in clinic

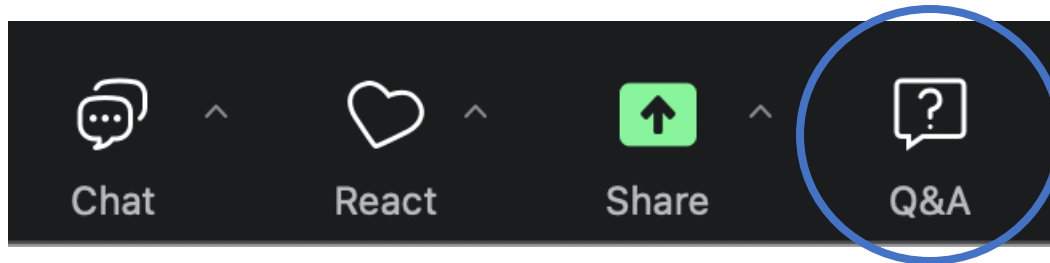
Search by vaccine: Select all that apply
Search by insurance status: Select one
Search by age group: Select one

Enter your zip code below to find locations near you.

Zip code: Search by zip code
Search radius: 20 miles
Search **Clear**

Questions

During today's webinar, please use the Q&A panel to ask your questions so CDPH panelists and subject matter experts (SMEs) can respond.



Special Thanks to Today's Presenters:

Samantha Johnston, Claudia Aguiluz, Louise McNitt, Terisha Gamboa, Josh Pocus

And to the webinar support team:

Billie Dawn Greenblatt, Michael Fortunka,
Blanca Corona

**Thank you for joining CDPH
for VFC Afternoon TEAch!**



Upcoming Webinar Opportunities

[CDPH Immunization Updates for Providers](#)

Next session: Friday, June 28, 2024

9:00 am – 10:30 am (PT)



California Department of Public Health
Immunization Branch