

# Vaccines for Adults Webinar: Charting the Course for the VFA Program

California Department of Public Health,  
Immunization Branch

August 7, 2024

12:00 – 1:00PM



# Housekeeping

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Attendee lines are automatically muted.



Please access today's slides at <https://eziz.org/vfa-317/vfa-resources/>. The webinar is being recorded and will be posted there after the event.



For webinar troubleshooting, please email Cecilia LaVu at [Cecilia.LaVu@cdph.ca.gov](mailto:Cecilia.LaVu@cdph.ca.gov).

# Questions

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During the webinar, please use the **Q&A panel** to submit written comments and questions so VFA program staff can respond directly.



**Resource links  
will be dropped  
into, "Chat"**



# Agenda

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- **Announcements, myCAvax & Program Updates** – Lindsay Reynoso
- **CAIR Updates** – Michael Powell
- **My Turn Updates** – Josh Pocus and Hannah Shows
- **ACIP and IZ Updates** – Dr. Caterina Liu
- **Resources** – Terisha Gamboa
- **Q&A Session** – Christina Sapad

# Webinar Objectives

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**At the end of this webinar, participants will be able to:**

1. Understand and share VFA Program updates with clinic staff.
2. Implement myCAvax, CAIR and MyTurn updates to the clinic's processes and workflow.
3. Explain updates made to adult ACIP vaccine recommendations.
4. Identify updated tools and resources that can be utilized for adult patients.

# Announcements, myCAvax and Program Updates

Lindsay Reynoso, CDPH



# Upcoming Webinar Opportunities

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## CDPH IZB Bi-weekly Updates for Providers

Next session: Friday, August 9, 2024

9:00 am – 10:30 am, PT



California Department of Public Health  
**Immunization Branch**

Archived Webinars: <https://eziz.org/provider-ed/webinars/>

# Vaccine Inventory Management

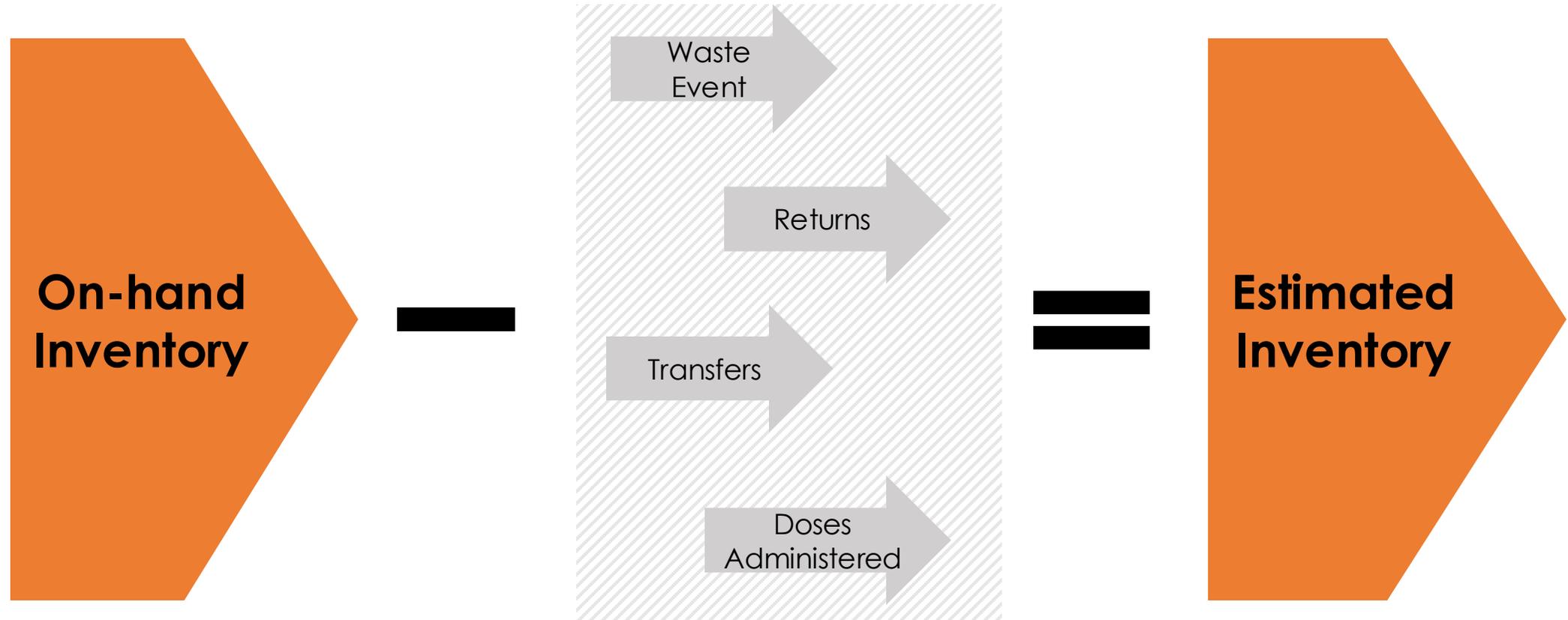
- myCAvax keeps track of your practice's VFA vaccine inventory for each vaccine brand and presentation ordered – these are called Inventory Records.
- When vaccine doses are reported as administered on the VFA vaccine order form, myCAvax deducts that quantity from the Inventory Record.
- The 'Inventory Summary' column on the VFC vaccine order form shows the 'Estimated inventory' and the 'Variance'.
  - **Estimated Inventory:** This number shows the amount in your Inventory Record minus the doses reported in the 'VFC Doses administered' since your last order. The goal is to have your 'VFC On-hand inventory' quantity match the 'Estimated inventory' quantity.
  - **Variance:** This field indicates if you are reporting too many (i.e. "Over by 5") or too few doses (i.e. "Under by 5") in your on-hand inventory, doses administered, or a combination of both. The goal is to have "0" variance.

Next Order Due Date (approximate) ⓘ	Provider Inventory ⓘ	Practice Volume & Order Frequency ⓘ
October 7, 2024	<a href="#">View Provider Inventory</a>	Every 3 months

Account for every dose of VFA-supplied vaccine ordered and received by the provider location.

Vaccine product	*Quantity	Lot number ⓘ	Expiration Date / Beyond use date ⓘ	*Qty since last order ⓘ	Provider inventory ⓘ	Recommended Order size ⓘ	*Doses requested
Hepatitis A Adult Havrix Single Dose Syringes - 10 Per Box	<input type="text"/>	<input type="text"/>	<input type="text"/> + <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0 <input type="text"/> <input type="button" value="Clear Row"/>

# Reminder: Providers Must Account for All Doses When Managing Vaccine Inventory



On-hand Inventory – (Waste Event, Returns, Transfers, Doses Administered) = Estimated Inventory

# Viewing Provider Inventory on a VFA Vaccine Order Request

Another new feature on Step 1 of a Vaccine Order Request is the 'Provider Inventory' field.

Providers can select 'View Provider Inventory' to navigate to the Provider Inventories page. This table provides a summary of all inventory transactions reported for each product.

The screenshot shows the 'VFA - Order Request' interface at 'Step 1 - Select Account and Product'. The 'Program Location' is set to 'Spicy Chicken Location - Vaccines for Adults'. The 'Next Order Due Date (approximate)' is 'October 7, 2024'. A 'Provider Inventory' field is highlighted with a red box and an orange arrow pointing to a detailed table of provider inventories.

**Provider Inventories**

24 items • Updated a few seconds ago

	Provider Inventory Name	Product	Available Quantity
1	PI-578105	Adacel Single Dose Syringes - 5 Per Box	100
2	PI-578332	Adacel Single Dose Vials - 10 Per Box	0
3	PI-578496	Adult Vaqta Single Dose Syringes - 10 Per Box	0
4	PI-578497	Abrysvo Single Dose Vials/ 5 box	0
5	PI-578498	Arexvy Single Dose Vials - 10 Per Box	0
6	PI-578499	Boostrix Single Dose Syringes - 10 Per Box	0
7	PI-578500	Varivax Single Dose Vials - 10 Per Box	0
8	PI-578501	TDVAX Vaccine Single Dose Vials - 10 Per Box	0

Account for every dose of VFA-supplied vaccine ordered and received by the provider location.

Navigation tabs: Vaccine Products, VFA On-hand Inventory, VFA Doses administered, **Provider inventory**, Order size

Table headers: Vaccine product, \*Quantity, Lot number, Expiration Date / Beyond use date, \*Qty since last order, Estimated Provider inventory, Recommended Order size, \*Doses requested

# Storage and Handling (S&H) Triaging when Reporting an Excursion

When submitting an excursion report, providers will now receive a triage result based on the excursion information inputted. This message will populate under the file upload prompt once the excursion information is inputted to help inform providers on next steps.

1. If no further action is needed, an orange message will populate, and the Excursion table will be greyed out.

2. If further action is needed, a red message will populate with instructions to contact the manufacturer to determine stability information, and this information will need to be entered in the Excursion table.

3. If temperatures were not recorded, a red message will populate with instructions to label the vaccines as 'Do not use', and the 'Affected Inventory' column of the Excursion table will need to be filled out.

1

Based on the information provided, no further action is needed at this time and you may continue vaccination services. Click Submit to document the excursion.

NOTE: Only report temperature excursions for program vaccines. Please do not report your privately purchased vaccines in myCAvax.

Please report your affected inventory and manufacturer's stability determination below. Contact the manufacturer to determine vaccine stability. If you have not been able to make contact with your manufacturer, you will need to return to this form once you have the necessary information from the manufacturer.

Provided that you have accurately reported details of your excursion to the vaccine manufacturers, and if the vaccine manufacturers have determined that your vaccines are OK to use, your clinic may resume vaccination services. For doses that may not be used, please remove the vaccine from your vaccine storage and log a returns and Excursions.

Affected Inventory			Manufacturer's Stability Determination			
Vaccine Group	Vaccine Brand	Presentation	Report case or reference number	New Beyond date (Optional)	Date incident reported to manufacturer	manufacturer stability determination
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Clear Row

2

Based on the information provided, it has been determined that the reported incident needs to be reported to the vaccine manufacturers to obtain stability information - Manufacturer Contact Information.

NOTE: Only report temperature excursions for program vaccines. Please do not report your privately purchased vaccines in myCAvax.

Please report your affected inventory and manufacturer's stability determination below. Contact the manufacturer to determine vaccine stability. If you have not been able to make contact with your manufacturer, you will need to return to this form once you have the necessary information from the manufacturer.

Provided that you have accurately reported details of your excursion to the vaccine manufacturers, and if the vaccine manufacturers have determined that your vaccines are OK to use, your clinic may resume vaccination services. For doses that may not be used, please remove the vaccine from your vaccine storage and log a returns and Excursions.

Affected Inventory			Manufacturer's Stability Determination			
Vaccine Group	Vaccine Brand	Presentation	Report case or reference number	New Beyond date (Optional)	Date incident reported to manufacturer	manufacturer stability determination
DTaP	Infanrix	Vial - 0...	12345	Aug 16, 2024	Jul 9, 2024	Doses...

Clear Row

3

Based on the information provided, do not use the vaccines and label them as 'Do not use'. Continue to store and monitor the vaccines. CDPH will be contacting you regarding next steps.

NOTE: Only report temperature excursions for program vaccines. Please do not report your privately purchased vaccines in myCAvax.

Please report your affected inventory and manufacturer's stability determination below. Contact the manufacturer to determine vaccine stability. If you have not been able to make contact with your manufacturer, you will need to return to this form once you have the necessary information from the manufacturer.

Provided that you have accurately reported details of your excursion to the vaccine manufacturers, and if the vaccine manufacturers have determined that your vaccines are OK to use, your clinic may resume vaccination services. For doses that may not be used, please remove the vaccine from your vaccine storage and log a returns and Excursions.

Affected Inventory			Manufacturer's Stability Determination			
Vaccine Group	Vaccine Brand	Presentation	Report case or reference number	New Beyond date (Optional)	Date incident reported to manufacturer	manufacturer stability determination
DTaP	Infanrix	Vial - 0...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Clear Row

# Policy on Storage and Handling Triaging

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- Providers do not need to wait for CDPH review of excursions unless it was a "temperatures not recorded" situation.
  - If temperatures were not recorded, CDPH will review the incident and provide follow-up guidance.
- If you were triaged to contact the manufacturer(s), follow their guidance regarding vaccine stability and report results on the excursion form.
  - If vaccines are spoiled, submit a return / waste form.
  - If vaccines are okay to be used, continue vaccination services. No need to wait for CDPH.

# Reporting an Excursion with No Storage Unit Involved

**VFA**  
VFA - Excursions  
Step 1 - Select Account and Enter Inventory Information

**Location and Contact Information**

\* Program Location  
Spicy Chicken Location - Vaccines for Adults

\* Contact  
Rex Bradley

**Excursion Information**

\* Was this stored in a storage unit or no storage unit involved?  
 Storage Unit  
 No Storage Unit Involved

\* Excursion event is related to: \* Please specify Other  
Other

**Excursion Start Date / Time**

\* Date: Jul 29, 2024 \* Time: 12:00 PM

**Excursion End Date / Time**

\* Date: Jul 29, 2024 \* Time: 12:30 PM

**Total Excursion time**  
0 Hours 30 Minutes

**Report data logger information**

\* Temperature excursion type  
Temperatures not recorded

\* Min temp \* Max temp \* °F/°C

**Excursion Information**

\* Was this stored in a storage unit or no storage unit involved?  
 Storage Unit  
 No Storage Unit Involved

\* Excursion event is related to: \* Please specify Other  
Other

Another new feature on the Excursion report page is the option to select 'No Storage Unit Involved' if the excursion occurred outside of a storage unit.

Providers can then select 'Other' from the 'Excursion event is related to' dropdown menu and specify details about the excursion in the 'Please specify Other' field.

An example scenario would be if an Excursion occurred while the doses were left outside of the storage unit and potentially exposed to room temperature for too long, but the temperatures were not recorded.

# Reporting an Excursion with No Vaccines Stored in Unit

This functionality will be available as part of the upcoming myCAvax release on **August 15, 2024**.

In the meantime, providers must continue to document Excursions with no vaccines in the unit in the 'Additional excursion notes' section of their **Manual Temperature Logs** form.

**NOTE:** After the **August 15 release**, providers can report excursions with no vaccines in the until in myCAvax.

### Temperature Log

Month & Year \_\_\_\_\_ Provider PIN \_\_\_\_\_

<b>Storage Unit Location/ID</b>	<b>Scale</b> <input type="checkbox"/> Fahrenheit <input type="checkbox"/> Celsius	<b>Storage Unit Type (select one)</b> <input type="checkbox"/> Refrigerator (36° to 46°F / 2° to 8°C) <input type="checkbox"/> Freezer (-58° to 5°F / -50° to -15°C) <input type="checkbox"/> ULT (-130° to -76°F / -90° to -60°C)
<b>Funding Source(s)</b> <input type="checkbox"/> VFC <input type="checkbox"/> VFA <input type="checkbox"/> LHD 317 <input type="checkbox"/> SGF <input type="checkbox"/> Private <input type="checkbox"/> _____		

Day	Time	Initials	Alarm	Current	Min	Max	Incident IDs
Exam- 1	8:00am 4:00pm	NN NN	 ✓	40.6 37.4	38.1 33.0	43.7 39.2	 12345
2	am pm						
3	am pm						
4	am pm						
5	am pm						
6	am pm						
7	am pm						
8	am pm						
9	am pm						
10	am pm						
11	am pm						
12	am pm						
13	am pm						
14	am pm						
15	am pm						

**Check temperatures twice a day:**

- Fill out clinic/unit details in header.
- Record the time and your initials.
- Record a check if alarm went off.
- Record Current, MIN, and MAX.
- Clear MIN/MAX on your device.
- Ensure data logger is recording.

**IF ALARM WENT OFF:**

- Clear MIN/MAX and alarm symbol.
- Post "Do Not Use Vaccines" sign.
- Alert your supervisor.
- Report excursion to myCAvax for all funding sources.
- Record myCAvax Batch Excursion # under Incident IDs.
- Ensure data logger is recording.

**On-Site Supervisor's Review**

When complete, check all that apply:

Temperatures were recorded twice daily.

I reviewed data files to find any missed excursions.  
Download date: \_\_\_\_\_

Any excursions were reported.

On-Site Supervisor's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Staff Names and Initials: \_\_\_\_\_

Additional excursion notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Keep all temperature logs and data files for three years.  
Falsifying log is grounds for vaccine replacement and program termination.

VFC: (877) 243-8832      VFA, LHD 317, SGF: (833) 502-1245

IMM-1535 Page 1 (6/6/24)

# Managing Storage Units from a Program Location

myCAVax  
Program Location  
Spicy Chicken Location - Vaccines for Adults

LHD/MCE: Sacramento, Department of Health Services  
myCAVax Id: CA8479206B10004  
Temporary Closure  
ISS Identifier: doh

Details | Vaccine Requests | **Storage and Handling** | Vaccine Inventories | Site Management

Transfers Sent (0)  
Transfers Received (0)  
Returns and Waste (0)  
Excursion Events (0)  
Shipment Incidents (1)

Shipment Incident Name	Product	Incident Type	Shipment	Created Date
S-0784	Arexvy Single Dose Vials - 10 Per Box	Out-of-range temperature		Mar 6, 2024, 11:12

Providers can now manage storage units from the 'Storage and Handling' tab on their VFA Program Location.

Navigate to the Program Location page and click the 'Storage and Handling' tab. Scroll all the way down to see the Storage Units table.

To edit or retire a storage unit, click the unique storage unit name. On the 'Details' tab of the Storage Unit page, edit any of the fields by clicking the pencil icon next to that field.

Storage Units (10)

Storage Unit N...	Storage Unit B...	Storage Unit ...	Storage Unit c...	Storage Type	Vaccines Stored	Unit Priority	Thermometer ...	Thermometer ...	Calibration Ex...
SC-37448	Sears	freezer 5000	13	Stand Alone	SGF;Outbreak;BAP	Backup	Wards	3254300000001	Jun 19, 2034
SC-37334			0				Thermo1223	ABC987XYZ	Jun 10, 2028
SC-37332	test	12412	43	Combination	VFC	Primary	test	1244	Oct 12, 2024

Storage Unit  
SC-37448

Details | Uploaded Documents | Related

Storage Unit Name	SC-37448	Thermometer Type (Select one)	Networked Continuous Temperature Monitoring system
Storage Type	Refrigerated Storage Capacity	Specify Other Thermometer Type	
Type	Stand Alone	Thermometer Model	Wards
Unit Priority	Backup	Thermometer Serial Number	3254300000001
Refrigerated Storage Unit cu. ft.	13	Calibration Expiration Date	6/19/2034
Storage Unit Brand	Sears	Account	Spicy Chicken Location
Storage Unit Model	freezer 5000	Location Application	
Vaccines Stored	SGF;Outbreak;BAP	Unit Grade	Purpose-built (Pharmacy/Laboratory Grade)

# Viewing Provider Dashboards

To view the myCAvax Providers Dashboard, navigate to the 'More' drop-down menu and click 'myCAvax Dashboard'.

This dashboard features charts and reports summarizing vaccine ordering and inventory management events at this program location.

The screenshot displays the myCAvax Providers Dashboard for Vaccines for Adults (VFA). The navigation bar includes links for Home, My Programs, My Turn Enrollment, Vaccine Orders, Program Locations, Vaccine Inventory, and a More menu. The More menu is open, showing options like Enrollment, Reports, Provider Locator, Knowledge Center, and myCAvax Dashboard (highlighted). The dashboard title is 'VFA Vaccines for Adults - Dashboard'. Below the title, it shows the user is viewing as 'SpicyChicken SpicyPrimaryVCor' on Jul 29, 2024. The main content area features three summary cards: 'Total Approved Quantity' (1,500), 'Total Quantity Shipped' (70), and 'Total Number of Doses Impacted (Damaged)' (389). Each card has a 'View Report' link. Below these are two bar charts: 'Total Approved Quantity for Orders by Product' and 'Total Quantity Shipped by Product'. A red error message is visible in the bottom right of the dashboard area.

Metric	Value
Total Approved Quantity	1,500
Total Quantity Shipped	70
Total Number of Doses Impacted (Damaged)	389

Product	Approved Quantity
Product 1	370
Product 2	310

Product	Quantity Shipped
Product 1	70

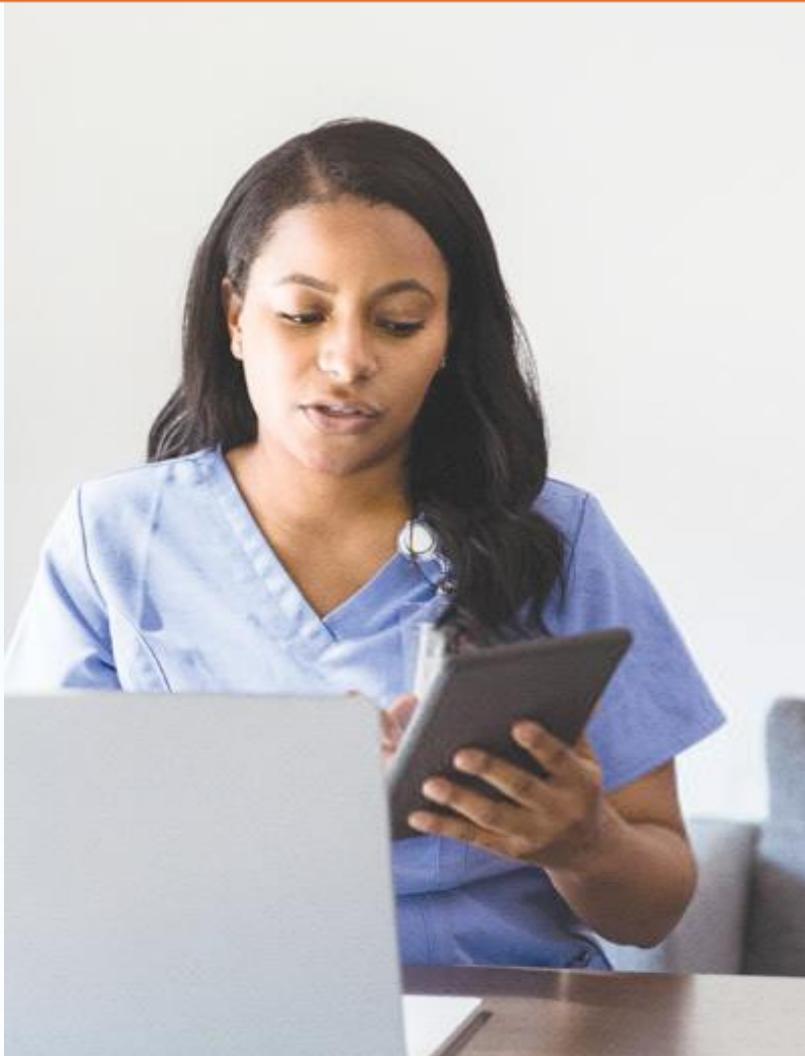
One or more of the fields selected in the component is no longer available in the report. Use the dashboard component editor to select one of the available fields.

# VFA Program Updates

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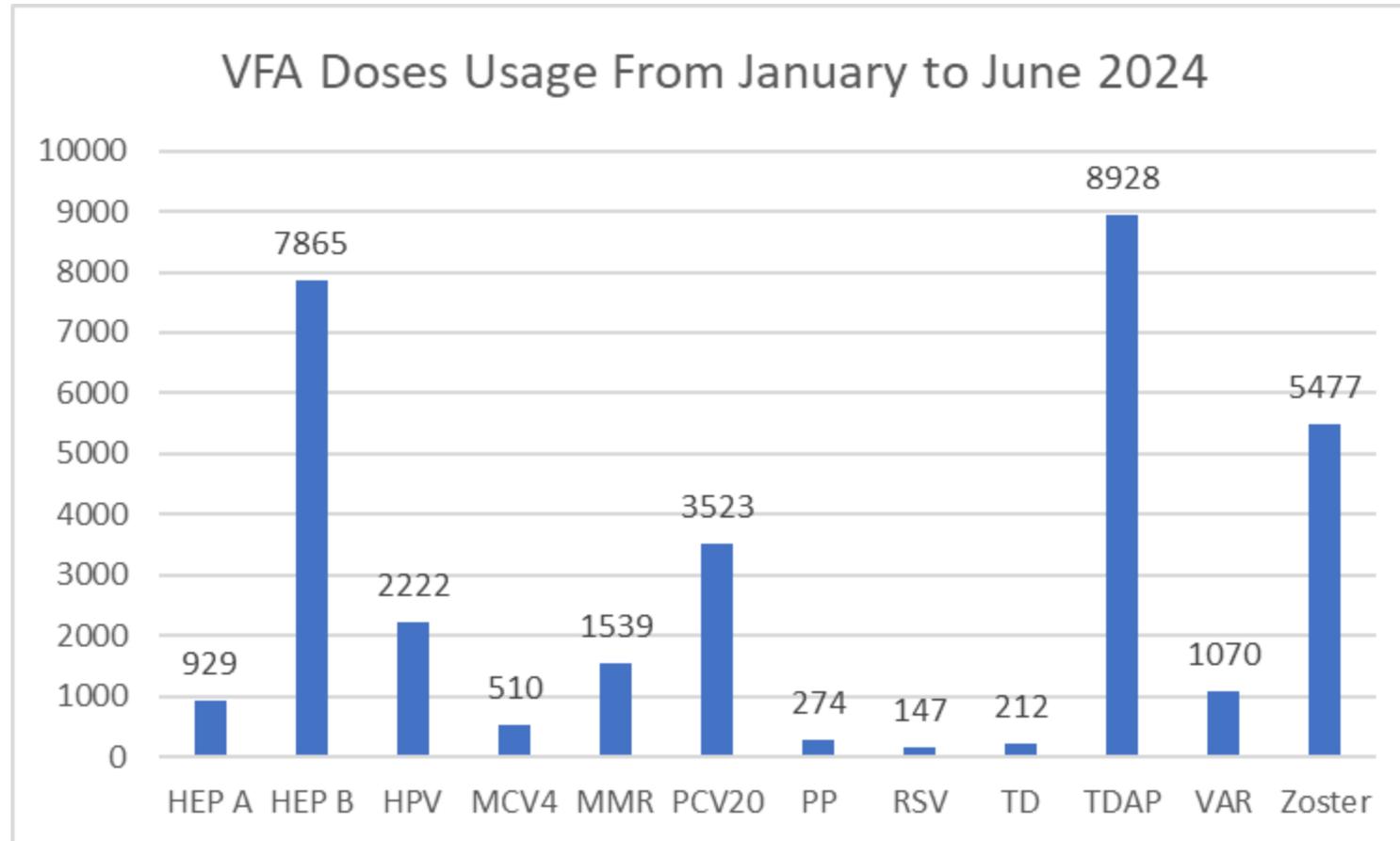
- **Next VFA Ordering Period – Projected October 2024**
  - New Fiscal Year Ordering Policy will be shared in September/October
- **VFA Immunization Information Reports – August 2024**
  - Report will include January – June 2024 Data
  - Reports will be emailed to the VFA Provider of Record and Primary Vaccine Coordinator
  - VFA Providers are required to document in or submit through data exchange, the VFA provided immunizations administered to eligible patients as “317” to the local immunization registry

# VFA VISITS: Reasons Why CAIR IIS Report <70%



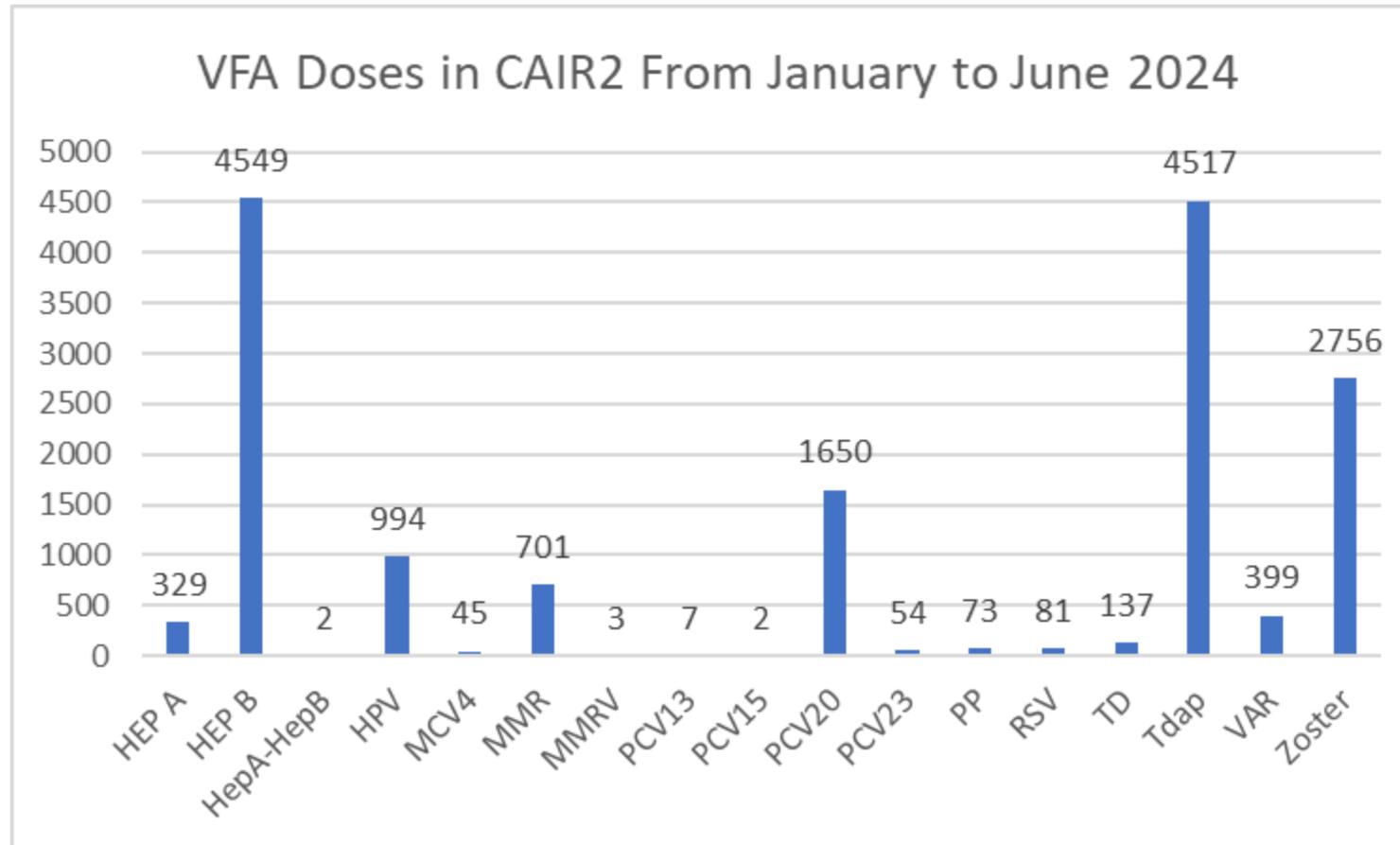
Issue	Number of Site Visits
<b>CAIR and EMR data exchange issues</b>	<b>58</b>
Does not apply: CAIR IIS Report rating is above 70%	21
Staff training – staff are selecting the incorrect eligibility category	9
Clinic is lacking the EMR function to document 317 eligibility	5
Staff is unaware of the CAIR documentation requirement	1
Staff to do not have access to CAIR	1
Other	10

# VFA Ordering Data: Doses Administered (Self-Reported)



# VFA Ordering Data: Doses Administered (CAIR Data)

**8.4% of Doses in CAIR2 meet the VFA Requirement**



# IIS Data Reports



August 2024

## Report: VFA Doses in California Immunization Registry

For: ABC Clinic  
PIN: 012345  
IIS ID: DE-12345

### Vaccine Accountability Requirements

As a Vaccines for Adults (VFA) provider, you are **required** to document immunizations administered to VFA-eligible patients as “317” doses to the California Immunization Registry (CAIR) or Healthy Futures/ RIDE (which now shares data with CAIR). To help you meet this requirement, we have developed a CAIR immunization report for data from Quarter 1 (Q1) to Quarter 2 (Q2) of 2024 (January – June 2024). Providers must review VFA doses reported in the immunization registry before every VFA order or at least every six months to ensure VFA doses administered have been documented accurately. **Please use this report to gain insight as to how your practice is submitting 317 doses to the immunization registry. Then, determine next steps to improve data quality and increase the percentage of doses submitted as “317.”**

What does your CAIR data<sup>1</sup> look like from January through June 2024?

VFA Doses from January – December 2023			
A	B	C	C/B
Doses Ordered	Reported Doses Administered	Doses in CAIR as “317”	% Doses Submitted to CAIR as “317”
190	205	44	21%

### Data Interpretation:

Starting on January 1, 2024, the VFA Program requires that doses administered reported with each VFA order are based on doses recorded in CAIR as “317.” According to this report, the value in Box B (Reported Doses Administered) should closely match the value in Box C (Doses in CAIR as “317”). If that is not the case, this will affect the doses the VFA Program approves for your clinic during vaccine ordering.

### <sup>1</sup>Data Limitations:

“Doses Ordered” and “Reported Doses Administered” were obtained from your submitted 317 orders during the Q1 to Q2 2024 VFA order period. The doses in CAIR were administered January 1, 2024, through June 30, 2024. Only doses that were labeled as “317” were counted. Number of doses may vary as the databases are live data and can be updated after the data was extracted.

### Determine Your Rating:

Ratings are based on % of target reached:

EXCELLENT: ≥ 90%  
VERY GOOD: 71%-89%  
GOOD: 51%-70%  
NEEDS IMPROVEMENT: ≤50%

**Excellent:** Congratulations! You did an excellent job of submitting doses for Q1 to Q2 2024. Keep up the amazing work!

**Good and Very Good:** Great job! You submitted most of your doses correctly for Q1 to Q2 2024. Your practice is well-positioned to achieve future excellence. Take steps below to increase accurate data submission.

**Needs Improvement:** Based on doses reported, you submitted less than 50% of doses accurately for Q1 to Q2 2024. Take steps below to increase accurate data submission.

### Steps to Increase the Accuracy of Doses Entered into CAIR or Healthy Futures:

Ensure you are submitting only your site’s doses to the registry using the correct IIS ID.

For sites submitting data through Healthy Futures, see contact information below if you have questions.

### CAIR data exchange users:

1. Confirm with your EHR vendor that Vaccine Eligibility Category (HL7) code “V23” is correctly mapped.
2. Ensure staff know how to correctly record 317 vaccine eligibility in your EHR for every administered dose.
3. Confirm 317 doses are correctly submitted via data exchange by running a “[doses administered](#)” report. Watch this [VFA webinar](#) (at 30 mins, 54 sec), [consult this guide](#) (page 42), and visit [CAIR](#) for additional training.
4. If staff need access to CAIR, request a Data Exchange Quality Assurance (DX QA) account at [CAIR Account Update](#).
5. Contact your [Local Data Exchange Representative](#) if you have further questions.

### CAIR manual entry users:

1. If your site uses the CAIR inventory feature, make sure your CAIR Power User selects “317” as the “Funding Source” when creating vaccine lots in CAIR. If the “317” funding source is not available to select, contact your [Local CAIR Representative](#).
2. Make sure staff selects “V23” as the patient’s eligibility criteria when recording an administered 317 funded vaccine dose in CAIR. If the 317 Vaccine eligibility is not available to select, contact your [Local CAIR Representative](#).
3. If staff need access to CAIR, have your authorized site representative request new user accounts in the [CAIR Account Update](#) system.
4. For more information about recording 317 doses accurately, watch this [VFA webinar](#) (at 16 mins, 12 sec) and view [these guides and videos](#). Contact your [Local CAIR Representative](#) if you have further questions.

### Healthy Future users:

Phone: 209-468-2292  
Fax: 209-462-2019  
Email: [support@myhealthyfutures.org](mailto:support@myhealthyfutures.org)  
URL: <http://www.myhealthyfutures.org>

**Note:** Your next report will be sent in January 2025. This report will include a percentage of total doses administered entered correctly into an immunization registry and a corresponding rating.

### References:

- [VFA Provider Agreement](#)
- [VFA Provider Agreement Addendum](#)

*Ideally, the number of reported doses administered and the doses in CAIR as “317” should closely match. If that is not the case, this will affect the doses the VFA Program approves for your clinic. Please work with your EHR vendor, Local CAIR Representative, and/or CAIR Data Exchange Specialist to identify and resolve issues as soon as possible.*

# CORE DATA ELEMENTS FOR IIS

- **Eligibility (317)**
- Race/ethnicity
- Date of administration
- Vaccine manufacturer
- Vaccine lot number
- **Name and title of the person who administered the vaccine**
- Address of the facility where the permanent record will reside
- Vaccine information statement (VIS)
- Date printed on the VIS
- Date the VIS was given to the patient or parent/guardian



Are data transferring correctly to



# CAIR Updates

Michael Powell, CDPH



# CAIR2 – Patients and Doses\*

<i>Measure</i>	<i>0-5 yrs</i>	<i>6-18 yrs</i>	<i>19+ yrs</i>	<i>All Ages</i>
<b>Patients In</b>	<b>3,597,822</b>	<b>8,412,554</b>	<b>40,394,145</b>	<b>52,404,521</b>
<b>Patients w/ <math>\geq 2</math> doses</b>	<b>2,386,096</b>	<b>7,481,375</b>	<b>34,399,529</b>	<b>44,267,000</b>
<b>Vaccine Doses</b>	<b>42,309,806</b>	<b>174,589,385</b>	<b>362,705,635</b>	<b>579,604,826</b>

\* As of July 22, 2024

# CAIR Update

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- **7/2/2024 - Sprint 13 / Release 2.8.15**

- Updated pneumococcal conjugate vaccines (PCV) schedule to align with CDC's recommendations accommodating PCV15 and PCV20

[Pneumococcal Vaccine Recommendations | CDC](#)

- Updated RSV schedule to allow two doses on the same day through data exchange

- **CAIR User Agreement**

- Account/password policy
  - 90-day Term
  - Sharing passwords
  - Unique email

[California Immunization Registry](#)

# CAIR Update

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- **Importance of Accurate Reporting**

- **Eligibility**

- CAA01 – State General Funds
    - V01 – Private
    - V02 – VFC Eligible Medi-CAL/CHDP
    - V03 – VFC Eligible Uninsured
    - V04 – VFC Eligible Native American/AK Native
    - V05 – VFC Eligible Underinsured (FQHC/RHC Only)
    - V23 – 317 Eligible LHD or HDAS Only

- **Funding**

- PHC70 – Vaccine stock used was privately funded
    - VXC51 – Vaccine stock used was publicly funded by the VFC program
    - VXC52 – Vaccine stock used was publicly funded by the non-VFC program
    - VXC50 – Vaccine stock used was publicly funded

- **Shot Giver**

# CAIR Demo

Michael Powell, CDPH



## MyTurn Updates

Josh Pocus, CDPH, Hannah Shows, Accenture



# Quick Step Flow Process – My Turn Enrollment

## Enrolling in My Turn without a myCAVax account

1. Visit [mycavax.cdph.ca.gov](https://mycavax.cdph.ca.gov).
2. Select the 'My Turn' tab next to the 'Home' tab to view the 'My Turn' landing page.
3. On the 'My Turn' landing page, select either the 'Enroll your organization' or 'Enroll Now' button. Begin enrolling in My Turn on the 'Step 1 - Create an Account' page.

## Enrolling in My Turn with a myCAVax account

1. Log in to myCAVax using your usual credentials.
2. Select the 'My Turn Enrollment' tab from your main navigation bar to view the 'My Turn - Enrollment' page.
3. On the 'My Turn - Enrollment' page, select the 'Enroll Location' button. The page redirects to the 'Step 1 - Required Training' page to begin My Turn enrollment.

For more information, view the '[Enrolling in My Turn](#)' Quick Sheet on EZIZ.



# My Turn Locator (Provider Community)



Providers are now 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. Transfer Vaccines

Search by program  Search by provider type

\*Zip code  Search radius  Search Reset

The screenshot shows the myCAVax interface with the following elements:

- Navigation bar: myCAVax, My Programs, Home, Vaccine Orders, Program Locations, Vaccine Inventory, Training
- Page title: Provider Locator
- Instructions: 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.
- Search section: **Find providers near you.** Includes a **Provider Locator** button and a **Transfer Vaccines** button.
- Filters: Search by program (VFC), Search by provider type (Public Health site, Private...), \*Zip code (94541), Search radius (20 miles), Search Reset
- Map: A map of Los Angeles with several red location pins.
- Provider list:
  - VFC** **St. John's Well Child and Family Ctr - Magnolia**  
Private Practice (e.g., family practice, pediatric, primary care) as agent for FQHC/RHC-deputized  
1401 Golf Course Road, Hayward, CA 94541  
1-800-555-1234
  - VFC BAP** **Test VFC Location**  
Public Health Clinic (state/local) as agent for FQHC/RHC-deputized  
300 Golf Course Road, Hayward, CA 94541  
1-800-555-1237
  - VFC** **Josh's Test Location**  
Public Health Clinic (state/local) as agent for FQHC/RHC-deputized  
300 Golf Course Road, Hayward, CA 94541

# My Turn Locator (Public Site Opt-In)



**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**

**Opt-in to My Turn Vaccine Locator (Public-facing).**

The My Turn Vaccine Locator is a public-facing page that helps patients find your location based on its proximity, vaccination services, and the patient's age and insurance status.

**My Locations**  
Use the "Search by Locator Status" dropdown below to filter locations by Vaccine Locator participation and status.

Search by Locator Status

Location	Vaccine Locator Status	Vaccine Locator
Kern Medical HQ	Active	<a href="#">Manage Vaccine Locator Form</a>
VFC Location	Inactive	<a href="#">Manage Vaccine Locator Form</a>
St John Health Site	Info needed	<a href="#">Manage Vaccine Locator Form</a>
St John Health Site	Active	<a href="#">Manage Vaccine Locator Form</a>
St John Health Site	Info needed	<a href="#">Manage Vaccine Locator Form</a>

[View More](#)

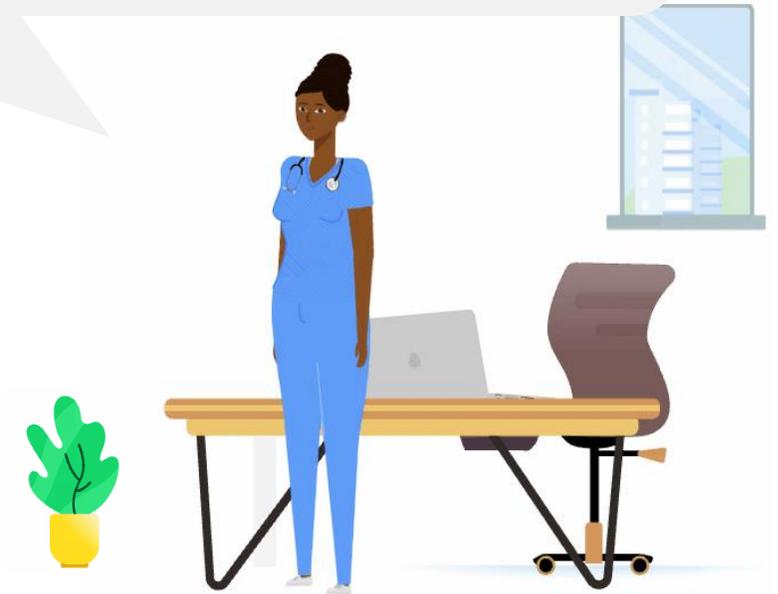
**California Department of Public Health**

For any program or policy inquiries, contact us at:  
✉ [ProviderCallCenter@cdph.ca.gov](mailto:ProviderCallCenter@cdph.ca.gov)  
(833) 502-1245  
Monday through Friday  
8AM to 5PM

For any technical difficulties, contact us at:  
✉ [mycavax.hd@cdph.ca.gov](mailto:mycavax.hd@cdph.ca.gov)  
**My Turn:**  
✉ [myturn.clinic.hd@cdph.ca.gov](mailto:myturn.clinic.hd@cdph.ca.gov)

**Resources**  
[Local Health Services](#)  
[EZIZ](#)  
[My Turn Administration](#)  
[Join CAIR](#)

If providers want a location to appear on the 'My Turn Public' portal, they will be able to select the 'My Turn Vaccine Locator Opt-in' tab, click the location's 'Manage Vaccine Locator Form' link, and complete the information form to opt-in.



# My Turn Locator (Public Site)



On **June 27<sup>th</sup>**, patients are now 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.

1



## More ways to get vaccinated

My Turn supports a range of vaccine types and options for find meets all your needs. Make an appointment to get one or more during a single visit. Or use our Vaccine Locator to find clinics in patients, offer the vaccines you need, and provide vaccination based on your insurance status and ability to pay.

[Make an appointment](#)

[Go to Vaccine Locator](#)

2

### Vaccine locator

Vaccinations for all

My Turn can help you find clinics that accept walk-in patients, offer the vaccines you need, and provide vaccination services based on your insurance status and ability to pay.

#### Know before you go

- What do I need for my appointment?**
  - When possible, please bring your vaccine record. You can get your record from the [Digital Vaccine Record \(DVR\)](#) portal.
  - Before making an appointment, please contact the provider to confirm if your insurance is accepted or if any fees apply.
  - People younger than 18 years must have parental or guardian consent unless the patient is an emancipated minor or getting a hepatitis B, HPV, or mpox vaccine.
  - Give yourself enough time to fill out a few patient forms when you arrive.
- What if I don't have insurance or my insurance doesn't cover the vaccine?**

If you don't have health insurance or your health insurance doesn't cover the vaccine, you may qualify to receive a no-cost or low-cost vaccine (provider fees may vary).

<b>18 years or younger</b> Available for anyone who: <ul style="list-style-type: none"><li>Does not have health insurance</li><li>is eligible for Medi-Cal</li><li>is an American Indian or Alaska Native</li></ul>	<b>19 years or older</b> Available for anyone who: <ul style="list-style-type: none"><li>Does not have insurance</li><li>Does not have an insurance plan that covers the vaccination (underinsured)</li></ul>
--	--

3

### 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  
Tue - 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

[Chickadee](#) [HPV](#) [MMR](#)

[See all](#)

Please contact the clinic to confirm the vaccine(s) you need are available.

[Learn more](#)



# 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  
Tue - 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  
Clickmapx 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  
Tue - 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

**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

# MyTurn Demo

Hannah Shows, Accenture



## Clinical Updates

Caterina Liu, CDPH

Public Health Medical Officer



# CDC's Advisory Committee on Immunization Practices (ACIP) Meeting: June 26 – 28, 2024

## Topics Covered:

- Influenza Vaccines (Vote)
- COVID-19 Vaccines (Vote)
- RSV Vaccines: Adult (Vote), Maternal/Pediatric
- Pneumococcal Vaccines (Vote)
- Combined DTaP-IPV-HIB-Hep B vaccine (Vaxelis) (Vote, VFC Vote)
- Meningococcal, HPV, Chikungunya, Dengue Vaccines

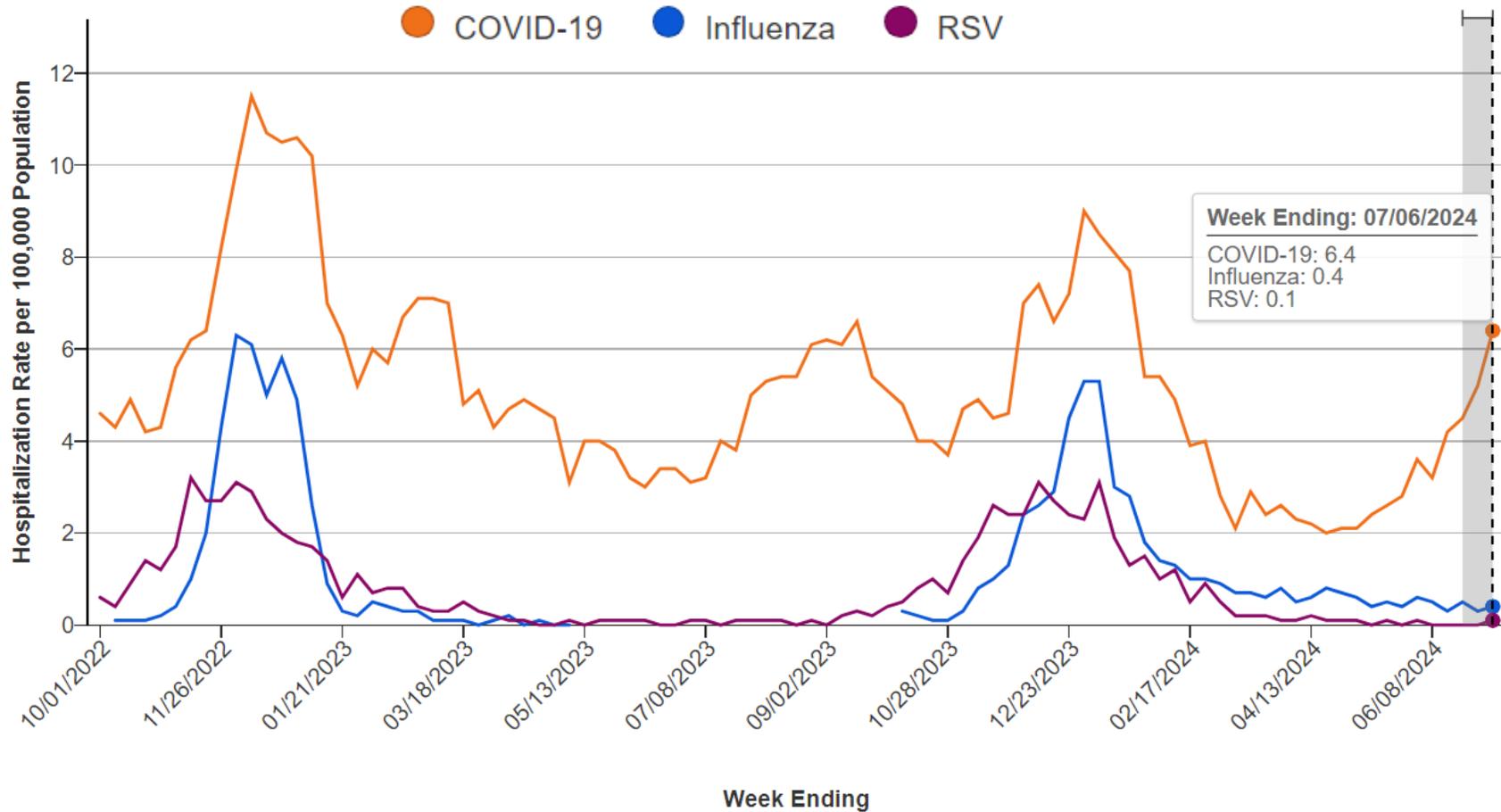
[Presentations](#) | [Agenda](#) | [Webcast Recordings](#)

[ACIP Recent Meeting Recommendations](#)

# Respiratory Virus Season Overview

- COVID-19, flu, and RSV disease peak during fall & winter months
- COVID-19 still causes many hospitalizations, although decreased from prior years

Weekly Rates of Respiratory Virus-Associated Hospitalizations in California

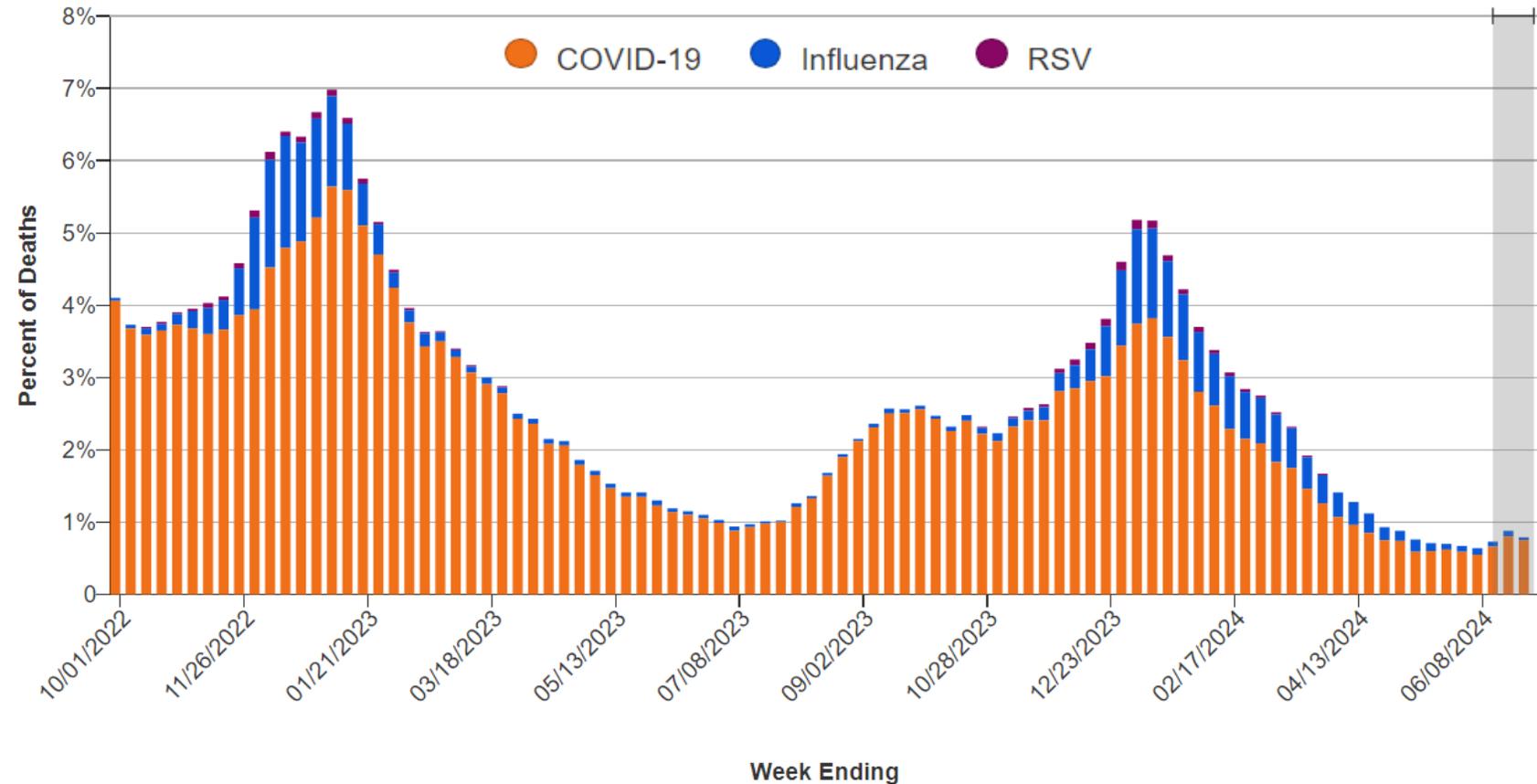


[Severe Viral Respiratory Illness Dashboard \(CDC\)](#), Data as of 7/6/24

# Trends in Viral Respiratory Deaths in the United States

- COVID-19 still causes many deaths, although decreased from prior years
- COVID-19 still causes more deaths than influenza or RSV

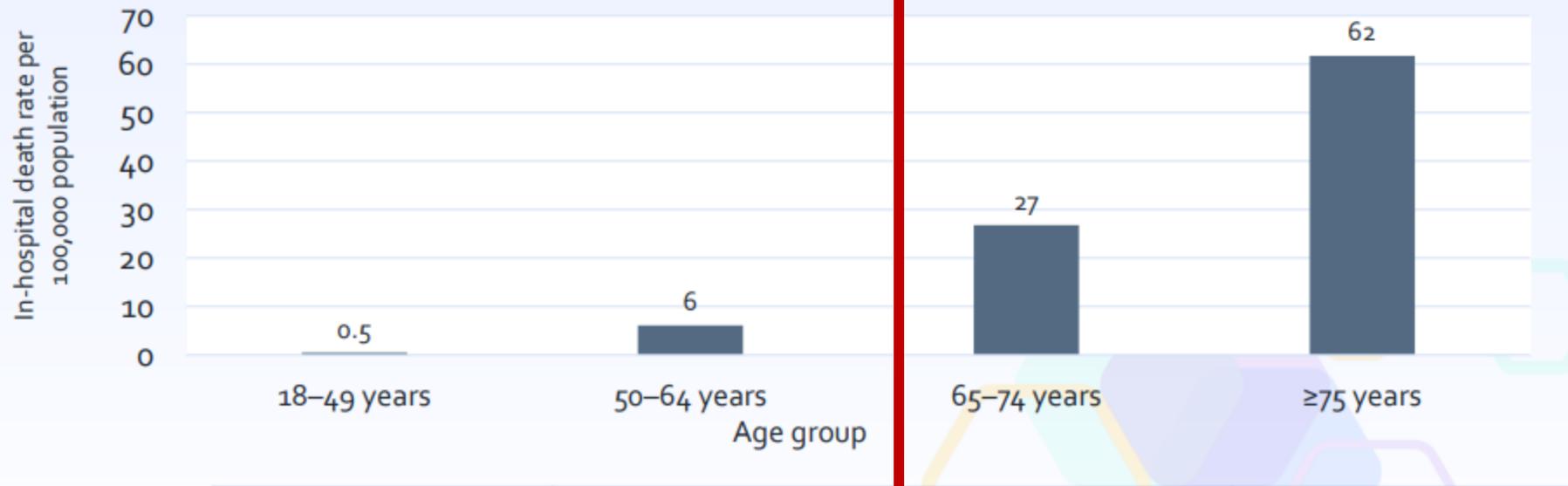
Weekly Percent of Total Deaths Associated with COVID-19, influenza, and RSV



[Severe Viral Respiratory Illness Dashboard \(CDC\)](#), Data as of 7/6/24

# Most COVID-19 Deaths in 65+

Cumulative In-Hospital Death Rate during COVID-19-Associated Hospitalization per 100,000 Population by Age Group — COVID-NET, October 2023–March 2024



Weighted percent of in-hospital deaths by age group	18–49 years	50–64 years	65–74 years	≥75 years
	3%	15%	32%	50%

# Influenza Vaccine Recommendations, 2024-2025

- **Age  $\geq 6$  months:** routine annual vaccination
- **Trivalent** 2024-25 Influenza Vaccine Composition
  - Influenza B/Yamagata viruses not detected globally since March 2020. Experts recommended removal of this strain.
  - Flu vaccines now contain 2 A and 1 B virus.
- September and October are the best times for most people to get vaccinated.

INFLUENZA VACCINE PRODUCT GUIDE 2024-2025		
<b>6 MONTHS &amp; OLDER</b>	 <b>Fluarix® Trivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe	 <b>FluLaval® Trivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe
	 <b>Flucelvax® Trivalent</b> Seqirus 0.5 mL single-dose syringe	 <b>Fluzone® Trivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose
	 <b>Afluria® Trivalent</b> Seqirus 0.5 mL single-dose syringe	
<b>3 YEARS &amp; OLDER</b>	 <b>Afluria® Trivalent</b> Seqirus 5.0 mL multi-dose vial*	 <b>Fluzone® Trivalent</b> Sanofi Pasteur, Inc. 5.0 mL multi-dose vial*
		 <b>Flucelvax® Trivalent</b> Seqirus 5.0 mL multi-dose vial*
<b>2-49 YEARS OLD &amp; HEALTHY</b>	 <b>FluMist® Trivalent</b> Astrazeneca 0.2 mL single-dose nasal sprayer	<b>65 YEARS &amp; OLDER</b>
		 <b>FLUAD® Adjuvanted Trivalent</b> Seqirus 0.5 mL single-dose syringe
<b>18 YEARS &amp; OLDER</b>	 <b>FluBlok® Trivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose syringe	 <b>Fluzone® High-Dose Trivalent</b> Sanofi Pasteur, Inc. 0.7 mL single-dose syringe

[Flu ID Guide](#)

[Influenza Vaccination: A Summary for Clinicians](#)

# Enhanced Influenza Vaccine Recommendations

- **Enhanced vaccine options include**

Type	Description	Brand Name
Adjuvanted	Contains MF59 adjuvant	FLUAD Adjuvanted
High-dose	Contains 4x hemagglutinin vs standard dose vaccines	Fluzone High-Dose
Recombinant	Contains 3x hemagglutinin vs standard dose vaccines	FluBlok

- **Age 65 years and older:**

- Preferentially recommended to receive any enhanced vaccine

- **Solid organ transplant recipients 18-64 years** on immunosuppressants:

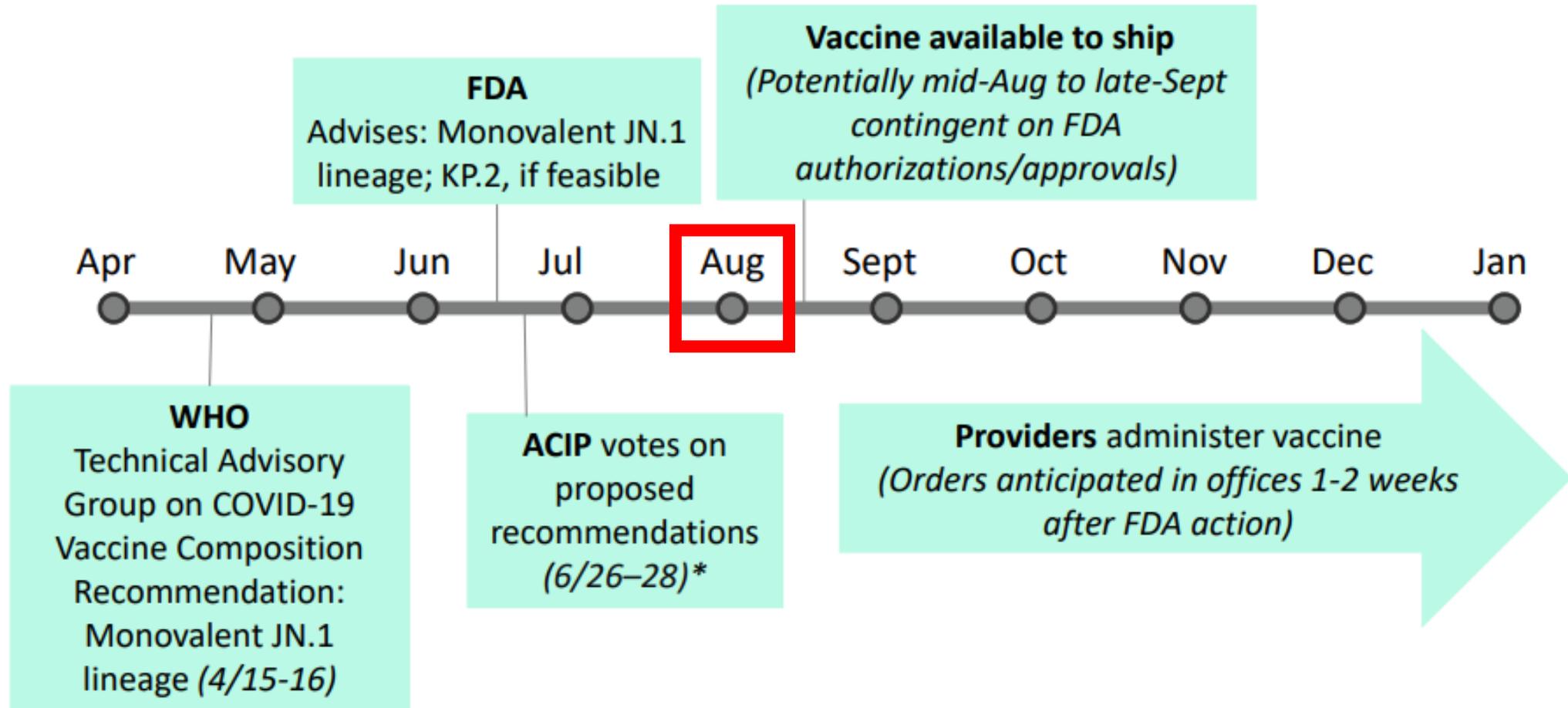
- Any age-appropriate vaccine, now including all enhanced options

# 2024-2025 Updated COVID-19 Vaccine

- The 2024–2025 formulation of COVID-19 vaccines has been updated to a **monovalent JN.1 vaccine, with a preference for the KP.2 sublineage if feasible**, based on circulating strains.
- ACIP recommends 2024-2025 COVID-19 vaccines as authorized or approved by FDA in persons  $\geq 6$  months of age.
- This recommendation will not take effect until 2024 – 2025 vaccines are authorized/approved by FDA, anticipated in late Summer/early Fall.

[Interim Clinical Considerations for Use of COVID-19 Vaccines \(CDC\)](#)

# Prospective 2024 COVID-19 Vaccine Timeline



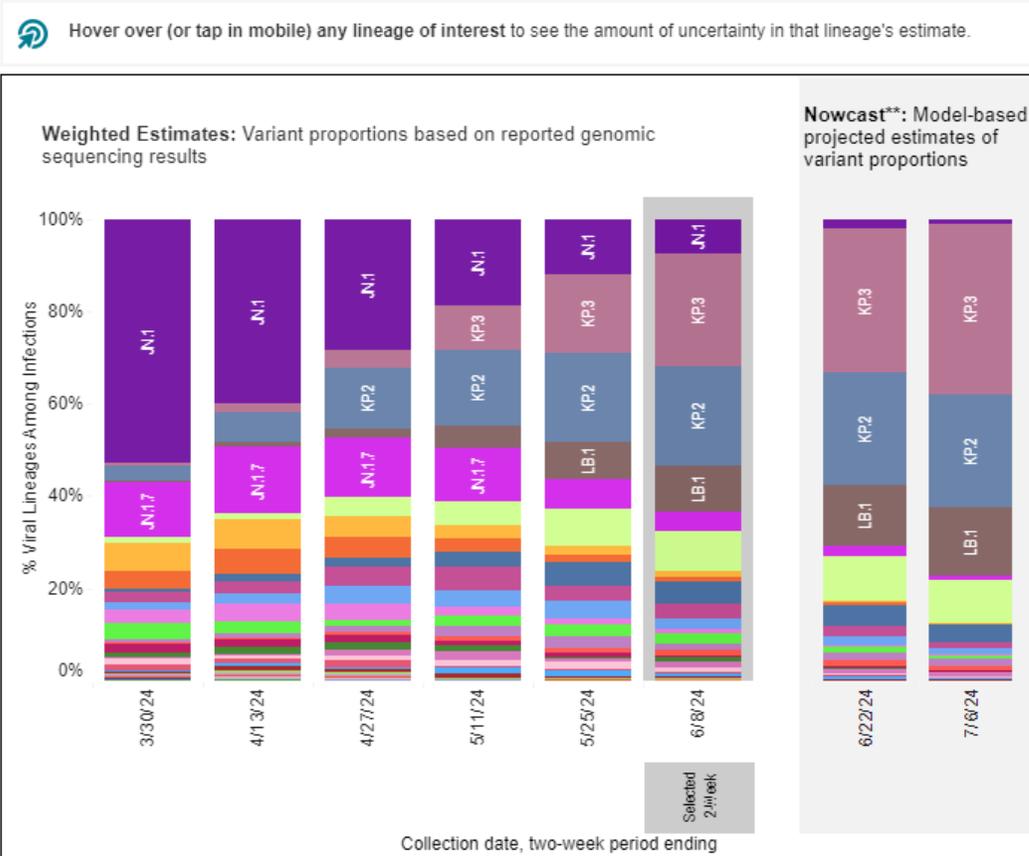
\*CDC publishes MMWR policy note following ACIP and FDA action (potentially late August to late September).

\*\*CDC updates COVID-19 Vaccine Interim Clinical Considerations immediately following FDA action.

[ACIP 6/27/24 Presentation](#)

# Variants and COVID-19 Vaccines

Weighted Estimates in United States for 2-Week Periods in 3/17/2024 – 7/6/2024



- KP.3 has been the dominant circulating variant and is an Omicron sub-lineage variant of JN.1, closely related to KP.2.
- 2024-2025 COVID-19 vaccine formulations contain JN.1 or KP.2 variants and are expected to provide protection against KP.3.

[CDC Variant Tracker](#); [Vaccines and Related Biological Products Advisory Committee Meeting Presentation- Update on Current Epidemiology of COVID-19 and SARS-CoV-2 genomics \(fda.gov\)](#)

# COVID-19 Vaccine Benefits

- Restore and enhance protection against the virus variants currently responsible for most infections and hospitalizations in the US
- Reduced risk of Long COVID
- Reduced risk of COVID-19 associated hospitalization and death

[CDC Science and Public Health Approach to Long COVID](#)  
[ACIP 6/27/24 Pres](#)



# Updated Older Adult RSV Vaccine Recommendations

- ACIP recommends the following older adults **should** receive a single dose of RSV vaccine:
  - Ages 75 years of age and older
  - Ages 60–74 years at increased risk of severe RSV disease
- These recommendations supplant the prior recommendation that adults  $\geq 60$  years of age **may** receive RSV vaccination, using shared clinical decision-making.
- Insufficient information to currently recommend RSV vaccine for adults 50 – 59 years, but review is ongoing.

[RSV Vaccination for Adults 60 Years of Age and Over \(CDC\)](#)

[Evidence to Recommendation Framework: RSV Vaccination \(ACIP 6/26/24\)](#)



# Chronic Medical Conditions Associated with Increased Risk of Severe RSV Disease

- Guidance provides flexibility for clinicians to assess patient risk
- Greatest risk of severe RSV disease in people ages  $\geq 75$  years and people with  $\geq 2$  chronic conditions



Lung disease



Cardiovascular disease



Moderate or severe immune compromise



Diabetes Mellitus with end-organ damage



Severe obesity  
(body mass index  $\geq 40$  kg/m<sup>2</sup>)



Frailty



Neurologic or neuromuscular conditions



Chronic kidney disease, advanced



Liver disorders



Hematologic disorders



Other chronic medical conditions that a healthcare provider determines increases risk of severe disease due to respiratory infection



Residence in a nursing home or other long-term care facility (LTCF)\*

# Older Adult RSV Vaccine Timing and Safety

- RSV vaccine is recommended as a **single dose**. Studies are ongoing to assess whether booster(s) are needed.
- May be given year-round; consider giving in late summer or early fall to maximize the benefits of RSV vaccination.
- Risk of Guillain-Barré syndrome (GBS) is rare and continuing to be studied.

[ACIP 6/26/24 Presentation](#)



# RSV Vaccines – No preferential recommendation

Brand Name	Abrysvo	Arexvy	mRESVIA
<b>Manufacturer</b>	Pfizer	GSK	Moderna
<b>Composition</b>	RSVpreF (protein)	RSVpreF (protein) + adjuvant	mRNA
<b>Recommended groups</b>	-Older Adults - Pregnant at 32-36 weeks GA, from September 1 to January 31	Older Adults*	Older Adults
<b>Year approved</b>	2023	2023	2024

\*Arexvy is FDA approved, but not CDC recommended, for adults 50-59 at increased risk of severe RSV

[RSV Vaccine Factsheet \(CDPH\)](#)

# RSV Immunization – Maternal/Pediatric

- Recommendation reminders:
  - Maternal RSV vaccine (Abrysvo is the ONLY product approved during pregnancy) for pregnant people at 32–36 weeks' gestation, using seasonal administration (September 1 – January 31), or
  - Monoclonal antibody nirsevimab for infants <8 months of age and infants 8-19 months of age at increased risk for severe RSV disease, from October 1 – March 31.
- Duration of protection is unknown; studies are ongoing.
- For people who previously received maternal RSV vaccine, during future pregnancies:
  - They are not recommended to receive additional doses,
  - Their infants should still receive nirsevimab.

[RSV Immunizations \(CDC\)](#)

# Preventing RSV Immunization Administration Errors

- CDC has received reports of errors, including:
  - Arexvy (GSK) given to pregnant people instead of Abrysvo (Pfizer)
  - Adult vaccines administered to children
- Ensure use of the correct RSV prevention product in the correct population.
- Take actions to [prevent vaccine administration errors](#), including automating error prevention alerts in electronic health record systems, ensuring proper education and training on vaccine recommendations
- Healthcare providers are strongly encouraged to report vaccine administration errors to [VAERS](#).

**YOU CALL THE SHOTS** Vaccine Administration: Preventing Vaccine Administration Errors

A vaccine administration error is any preventable event that may cause or lead to inappropriate medication use or patient harm.<sup>1</sup> Vaccine administration errors can have many consequences, including inadequate immunological protection, possible injury to the patient, cost, inconvenience, and reduced confidence in the health care delivery system. Take preventive actions to avoid vaccine administration errors and establish an environment that values reporting and investigating errors as part of risk management and quality improvement.

Vaccine administration errors may be due to causes such as:

- Insufficient staff training
- Lack of standardized protocols
- Easily misidentified products (e.g. DTap, DT, Tdap, Td)
- Distraction
- Patient misidentification
- Changes in recommendations
- Using nonstandard or error-prone abbreviations

If an error occurs, determine how it occurred and take the appropriate actions to put strategies in place to prevent it from happening in the future. The following table outlines common vaccine administration errors and possible preventive actions you can take to avoid errors.

Error(s)	Possible Preventive Actions
<b>Wrong vaccine, route, site, or dosage (amount); or improperly prepared.</b>	Circle important information on the packaging to emphasize the difference between the vaccines.
	Include the brand name with the vaccine abbreviation whenever possible (e.g. PCV13 [Prevnar13]) in orders, medical screens, etc.
	Separate vaccines into bins or other containers according to type and formulation. Use color-coded identification labels on vaccine storage containers.
	Store look-alike vaccines in different areas of the storage unit (e.g., pediatric and adult formulations of the same vaccine on different shelves in the unit).
	Do not list vaccines with look-alike names sequentially on computer screens, order forms, or medical records, if possible.
	Consider using "name alert" or "look-alike" stickers on packaging and areas where these vaccines are stored.
	Consider purchasing products with look-alike packaging from different manufacturers, if possible.
	Establish "Do NOT Disturb" or no-interruption areas or times when vaccines are being prepared or administered.
	Prepare vaccine for one patient at a time. Once prepared, label the syringe with vaccine name.
	Do not administer vaccines prepared by someone else.
	Triple-check work before administering a vaccine and ask another staff member to check.
	Keep reference materials on recommended sites, routes, and needle lengths for each vaccine used in your facility in the medication preparation area.
	Clearly identify diluents if the manufacturer's label could mislead staff into believing the diluent is the vaccine itself.
Integrate vaccine administration training into orientation and other appropriate education requirements.	
Provide education when new products are added to inventory or recommendations are updated.	
Use standing orders, if appropriate.	

1. National Coordinating Council for Medication Error Reporting and Prevention, <https://www.nccmerp.org/about/medication-errors>  
01/05/2021 CS 12/2013-A

[Vaccine Administration: Preventing Vaccine Administration Errors](#)

# New Pneumococcal Vaccine Available

- ACIP recommends PCV21 (Capvaxive) as an option for adults  $\geq 19$  years who currently have a recommendation to receive a dose of PCV
- No current preference for PCV21 over other adult pneumococcal vaccine options (PCV20 or PCV15+PPSV23)
- Pneumococcal vaccine guidance reminder:
  - Pneumococcal vaccination recommended for people ages 65+ or 19-64 years with certain chronic conditions
  - Pneumococcal timing guides will be updated in coming months ([CDC](#) | [CDPH](#))

[Capvaxive \(FDA\)](#)

# PCV21 Serotypes Differ from Other Vaccines

	1	3	4	5	6 A	6 B	7 F	9 V	1 4	1 8 C	1 9 A	1 9 F	2 3 F	2 2 F	3 3 F	8	1 0 A	1 1 A	1 2 F	1 5 B	2	9 N	1 7 F	2 0	1 5 A	1 5 C	1 6 F	2 3 A	2 3 B	2 4 F	3 1	3 5 B			
PCV15																																			
PCV20																																			
PPSV23																																			
PCV21																																			

- Covers serotypes that cause 77 – 85% of invasive pneumococcal disease (IPD) in adults
- Does *not* contain serotype 4 (included in PCV20 and PCV15), which is causing increased IPD in some American Indian and Alaska Native (AIAN) communities and people experiencing homelessness

# Other ACIP Topics

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- Meningococcal vaccine
  - Updated guidance expected February 2025
  - GSK MenABCWY vaccine under review by FDA
- HPV vaccine recommendations under review by ACIP workgroup
- Chikungunya vaccine recommendations under development
- Dengue vaccine (Dengvaxia) discontinued by manufacturer

[ACIP June 26-28, 2024 Presentation Slides](#) | [Immunization Practices](#) | [CDC](#)

## Resources

Terisha Gamboa, CDPH



# Updates to VFA Program Materials

## VFA Resources Page

California Vaccines for Adults (VFA) Program  
**2024 Program Participation Requirements at a Glance**

Requirement	Summary	Resources/Job Aids
Vaccine Management Plan	Maintain a current and completed vaccine management plan (VMP) for routine and emergency situations that includes practice-specific, vaccine-management guidelines and protocols, names of staff with temperature monitoring responsibilities, and completion dates of required EZIZ lessons for key practice staff.  Review and update the VMP at least annually, when program requirements change, and when staff with designated vaccine-management responsibilities change.  Designate a staff member responsible for updating the practice's VMP.  Staff with assigned vaccine-management responsibilities must review, sign, and date the VMP annually and each time it is updated.  Follow emergency guidelines to prepare for, respond to, and recover from any vaccine-related emergencies.  Store the VMP in a location easily accessible by staff, ideally near the vaccine storage units.  Practices using mobile units to administer VFA-supplied vaccines must maintain a current and complete Mobile Unit VMP and keep it in the mobile unit.	<a href="#">Vaccine Management Plan (IMM-1122)</a>  <a href="#">Provider Operations Manual (IMM-1248) Chapter 3</a>  <a href="#">Mobile Unit Vaccine Management Plan (IMM-1276)</a>
Key Practice Staff  <i>Updated!</i>	Designate and maintain key practice staff in the practice's profile on myCAvax. Immediately report to the program changes to key practice staff. A change in the Provider of Record or Designee requires a signed Key Practice Staff Change Request Form. VFA providers should list staff responsible for servicing the adult patient population and those assuming responsibility for VFA related matters.  <b>Provider of Record (POR):</b> The on-site physician-in-chief, medical director, or equivalent who signs and agrees to the terms of the VFA "Provider Agreement" and the "VFA Provider Agreement Addendum" and is ultimately accountable for the practice's compliance. Must be a licensed MD, DO, NP, PA, pharmacist, or a Certified Nurse Midwife with prescription-writing privileges in California.  <b>Provider of Record Designee:</b> The on-site person who is authorized to sign VFA Program documents and assumes responsibility for VFA-related matters in the absence of the Provider of Record.  <b>Vaccine Coordinator:</b> An on-site employee who is fully trained and responsible for implementing and overseeing the practice's vaccine management plan.  <b>Backup Vaccine Coordinator:</b> An on-site employee fully trained in the practice's vaccine management activities and fulfills the responsibilities of the Vaccine Coordinator in his/her absence.  <b>Immunization Champion (optional):</b> A staff member who goes above and beyond their normal duties to promote immunizations to patients and in the community.	<a href="#">Vaccine Coordinator Roles &amp; Responsibilities (IMM-968)</a>  <a href="#">VFA Key Practice Staff Change Request Form (IMM-1523)</a>  <a href="#">VFA Provider Agreement (IMM-1514)</a>  <a href="#">VFA Agreement Addendum (IMM-1515)</a>

California Department of Public Health, Immunization Branch IMM-1270 (8/24)

California Vaccines for Adults (VFA) and LHD 317 Programs  
**Provider Agreement Addendum**

I, on behalf of myself and any and all practitioners associated with this medical office, group practice, Health Maintenance Organization (HMO), health department, community/migrant/rural clinic, hospital, or other entity of which I am the physician-in-chief, medical director or equivalent, agree to comply with all VFA/317 Program requirements listed below.

- Provider Profile**
  - Designate the on-site Provider of Record Designee, who is authorized to sign VFA/317 Program documents and assume responsibility for VFA/317-related matters in the absence of the Provider of Record.
  - Designate the on-site [Vaccine Coordinator and Backup Vaccine Coordinator \(IMM-968\)](#), who are responsible for implementing the practice's vaccine management plan.
  - Immediately report to the VFA/317 Program changes to key practice staff assuming VFA/317 roles (Vaccine Coordinator or Backup, Provider of Record or Designee); a change in the Provider of Record or Designee requires a signed "Key Practice Staff Change Request Form."
  - Immediately report to the VFA/317 Program changes to the practice address or account ownership, which may require additional follow-up.
- Vaccine Management Plan**
  - Maintain a current and complete vaccine management plan for routine and emergency situations that includes practice-specific, vaccine-management guidelines and protocols, names of staff with temperature monitoring responsibilities, and required EZIZ lesson completion dates for all key practice staff.
  - Review and update the plan at least annually, when VFA/317 Program requirements change, and when staff with designated vaccine-management responsibilities change.
  - Designate a staff member responsible for updating the practice's management plan.
  - Staff with assigned vaccine-management responsibilities must review, sign, and date the vaccine management plan annually and each time it is updated.
  - Follow emergency guidelines to prepare for, respond to, and recover from any vaccine-related emergencies.
  - Store the vaccine management plan in a location easily accessible by staff, ideally near the vaccine storage units.
  - For practices using mobile units to administer VFA/317-supplied vaccines:** Mobile-only clinics or clinics with mobile units must maintain a current and complete "Mobile Unit Vaccine Management Plan" and keep it in the mobile unit.
- Training**
  - Anyone acting in VFA/317 roles (Provider of Record and Designee, Vaccine Coordinator and Backup) must complete the required EZIZ lessons when hired and annually thereafter; staff must demonstrate competency in their assigned VFA/317 roles.
  - Any clinician who administers VFA/317-supplied vaccines must be knowledgeable of and familiar with all ACIP-recommended immunizations, including schedules, indications, dosages, and new products.
  - All staff who conduct VFA/317 Program eligibility screening, documentation, and billing (e.g., front- or back-office staff) must be knowledgeable of all VFA/317 eligibility categories, documentation, and billing requirements.
  - All staff and supervisors who monitor storage unit temperatures or sign off on VFA/317 temperature logs must complete the related EZIZ lesson when hired and annually thereafter; they must be fully trained on use of the practice's data loggers.

VACCINES FOR ADULTS AND LOCAL HEALTH DEPARTMENT 317 PROGRAMS  
**KEY PRACTICE STAFF CHANGE REQUEST FORM**  
 (For Provider of Record or Provider of Record Designee)

Complete, sign, and email to the Provider Call Center at [ProviderCallCenter@cdph.ca.gov](mailto:ProviderCallCenter@cdph.ca.gov)

**INSTRUCTIONS:** Providers must use this form to immediately report changes to the Provider of Record or the Provider of Record Designee. The Provider of Record must sign the form acknowledging his/her authorization of these changes. Key clinic staff must complete required lessons on [www.EZIZ.org](http://www.EZIZ.org). Completion of those lessons must occur before the VFA or LHD 317 Program makes any changes to the practice's VFA or LHD 317 Provider Information.

- Provider of Record (POR): The physician-in-chief, medical director, or equivalent role that signs and agrees to the terms of the "VFA Provider Agreement" or "LHD 317 Agreement" and the California "VFA and LHD 317 Provider Agreement Addendum" and who is ultimately accountable for the practice's compliance. The Provider of Record must be a licensed MD, DO, NP, PA, pharmacist, or a Certified Nurse Midwife with prescription-writing privileges in California.
- Provider of Record Designee: The on-site employee that is designated by the Provider of Record to sign VFA or LHD 317 documents on his/her behalf and assume responsibility for VFA or LHD 317-related matters in the absence of the Provider of Record.
- Vaccine Coordinator: On-site employee who is fully trained and responsible for implementing and overseeing the provider's vaccine management plan. The Vaccine Coordinator might be responsible for all vaccine management activities, including training other (especially new) staff. In other practices, a different person might have one or more vaccine management responsibilities.
- Backup Vaccine Coordinator: On-site employee who is fully trained in the practice's vaccine management activities and fulfills responsibilities of the Vaccine Coordinator if the Vaccine Coordinator is unavailable.

Practice Information			
Practice Name	PIN	Registry ID	
Address			County
City	ZIP	Phone	Fax

Key Practice Staff								
Change	Completed Lessons	Role/Responsibility	Name	Title (MD, DO, NP, PA)	Specialty/Clinic Title*	National Provider ID*	Medical License*	Contact Information
<input type="checkbox"/>	<input type="checkbox"/>	Provider of Record			Specialty: Clinic Title:			Direct Phone Number: Email:
<input type="checkbox"/>	<input type="checkbox"/>	Provider of Record Designee			Specialty: Clinic Title:			Direct Phone Number: Email:
<input type="checkbox"/>	<input type="checkbox"/>	Vaccine Coordinator	Contact the Provider Call Center at (833) 502-1245 or <a href="mailto:ProviderCallCenter@cdph.ca.gov">ProviderCallCenter@cdph.ca.gov</a>					
<input type="checkbox"/>	<input type="checkbox"/>	Backup Vaccine Coordinator	Contact the Provider Call Center at (833) 502-1245 or <a href="mailto:ProviderCallCenter@cdph.ca.gov">ProviderCallCenter@cdph.ca.gov</a>					

\*Include if applicable

[At-a-Glance \(IMM-1270\)](#)

[Provider Agreement Addendum \(IMM-1515\)](#)

[Key Practice Staff Form \(IMM-1523\)](#)

# Updated Program Materials – Now Universal!

### Temperature Log

Month & Year \_\_\_\_\_ Provider PIN \_\_\_\_\_

Storage Unit Location/ID \_\_\_\_\_ Scale  Fahrenheit  Celsius

Funding Source(s)  VFC  VFA  LHD 317  SGF  Private \_\_\_\_\_

Storage Unit Type (select one)  
 Refrigerator (36° to 46°F / 2° to 8°C)  
 Freezer (-58° to 5°F / -50° to -15°C)  
 ULT (-130° to -76°F / -90° to -60°C)

Day	Time	Initials	Alarm	Current	Min	Max	Incident IDs
Example	8:00 am	NN		40.5	38.1	43.7	
	4:00 pm	NN	✓	37.4	33.0	39.2	12345
1	am						
	pm						
2	am						
	pm						
3	am						
	pm						
4	am						
	pm						
5	am						
	pm						
6	am						
	pm						
7	am						
	pm						
8	am						
	pm						
9	am						
	pm						
10	am						
	pm						
11	am						
	pm						
12	am						
	pm						
13	am						
	pm						
14	am						
	pm						
15	am						
	pm						

**Check temperatures twice a day:**  
 1. Fill out clinic/unit details in header.  
 2. Record the time and your initials.  
 3. Record a check if alarm went off.  
 4. Record Current, MIN, and MAX.  
 5. Clear MIN/MAX on your device.  
 6. Ensure data logger is recording.

**IF ALARM WENT OFF:**  
 1. Clear MIN/MAX and alarm symbol.  
 2. Post "Do Not Use Vaccines" sign.  
 3. Alert your supervisor.  
 4. Report excursion to myCAvax for all funding sources.  
 5. Record myCAvax Batch Excursion # under Incident IDs.  
 6. Ensure data logger is recording.

**On-Site Supervisor's Review**  
 When complete, check all that apply:  
 Temperatures were recorded twice daily.  
 I reviewed data files to find any missed excursions.  
 Download date: \_\_\_\_\_  
 Any excursions were reported.  
 On-Site Supervisor's Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Staff Names and Initials: \_\_\_\_\_

Additional excursion notes: \_\_\_\_\_

Keep all temperature logs and data files for three years.  
 Falsifying log is grounds for vaccine replacement and program termination.  
**VFC: (877) 243-8832 VFA, LHD 317, SGF: (833) 502-1245** IMM-1535 Page 1 (6/6/24)

### Vaccine Management Plan

KEEP YOUR MANAGEMENT PLAN NEAR THE VACCINE STORAGE UNITS

Complete this form and ensure key practice staff sign the signature log whenever your plan is revised. To ensure emergency preparedness, review periodically to ensure content is up to date. (If applicable, see "mobile unit plan.")

#### Section 1: Important Contacts

**KEY PRACTICE STAFF & ROLES**

Office/Practice Name	Provider PIN	CAIR Registry ID
Address	<input type="checkbox"/> VFC <input type="checkbox"/> VFA <input type="checkbox"/> LHD 317 <input type="checkbox"/> SGF	<input type="checkbox"/> Other: _____

Role	Name	Title	Phone #	Alt Phone #	E-mail
Provider of Record					
Provider of Record Designee					
Organization Coordinator					
Vaccine Coordinator					
Backup Vaccine Coordinator					
Additional Vaccine Coordinator					
Immunization Champion (optional)					
Receives vaccines					
Stores vaccines					
Handles shipping incidents					
Monitors storage unit temperatures					
Transports vaccines					

**USEFUL EMERGENCY NUMBERS**

Service	Name	Phone #	Alt Phone #	E-mail
CDPH Field Representative				
VFC Program		(877) 243-8832		MyVFCvaccines@cdph.ca.gov
VFA/LHD 317 Programs		(833) 502-1245		providercallcenter@cdph.ca.gov
SGF Program		(833) 502-1245		SGFvaccine@cdph.ca.gov
Utility Company				
Building Maintenance				
Building Alarm Company				
Refrigerator/Freezer Alarm Co.				
Refrigerator/Freezer Repair				

California Department of Public Health, Immunization Branch IMM-1122 (6/24) 1

### Vaccine Transport Log

Complete for each vaccine transport. Total time in transport container should be up to 8 hours (or manufacturer guidance) and counts towards manufacturer limits. Select multiple funding sources if vaccines were stored in the same unit and are being transported in the same cooler. Report all temperature excursions.  
 Questions? VFC: (833) 502-1245 | VFA/LHD 317/SGF: (833) 502-1245

Provider Name: \_\_\_\_\_ Provider PIN: \_\_\_\_\_ Data Logger Serial #: \_\_\_\_\_  
 Transported to: \_\_\_\_\_ Provider PIN: \_\_\_\_\_ Transport Date: \_\_\_\_\_

Transport Reason:  Power outage  Excess supply  Short-dated  Unit malfunction  Building maintenance  Off-site  Other \_\_\_\_\_

Vaccines must be transported to another active provider in the same program:  VFC  VFA  LHD 317  SGF  Other \_\_\_\_\_

Vaccine	Funding Source	Lot Number	Number of Doses	Expiration Date/Beyond-Use Date	Vaccine previously transported?	Refrigerated (R) Frozen (F)	Comments
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	
	VFC   VFA   LHD 317   SGF				Y   N	R   F	

Storage Unit Temperatures	Time	Transport Container Temperatures	Time
Primary unit before departure: _____ °C/F		Before departure: Current: _____ Min: _____ Max: _____ °C/F	
Destination unit upon arrival: _____ °C/F		Upon arrival: Current: _____ Min: _____ Max: _____ °C/F	

Chain of Custody Signatures  
 Prepped By Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Courier Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date/Time Received: \_\_\_\_\_ Return Date/Time: \_\_\_\_\_  
 Receiving Party/POC: \_\_\_\_\_ Signature: \_\_\_\_\_ Date/Time Received: \_\_\_\_\_

Notes: \_\_\_\_\_

California Department of Public Health, Immunization Branch IMM-1132 (7/24)

Temperature Log (IMM-1535)

Vaccine Management Plan (IMM-1122)

Transport Logs (IMM-1132)

# Updates to Other Program Materials

## Vaccine Management and Storage and Handling

### Resources and Job Aids

+ VFA Program Management

+ Eligibility

- Vaccine Management and Storage & Handling - **New and Updated!**

See [Storage & Handling Job Aids](#) for temperature logs, data logger guides, and vaccine transport guidance available for all vaccination programs!

- [EZIZ's Storage Unit Specifications](#)
- [EZIZ's Online Lessons](#)
- [Vaccine Management Plan | PDF](#)
- [Mobile VMP | PDF](#)
- [Vaccine Brand Change Request Forms](#)
- [Vaccine Receiving Checklist](#)
- [Vaccine Usage Logs](#)
- [How to Do a Physical Inventory](#)
- [Physical Inventory Forms](#)
- [Sticker Templates to identify vaccine boxes](#) (print on Avery 94500 labels)
- [Vaccine Transport Log](#)
- [Universal Temperature Log](#)

**Note:** Other materials will be updated in the coming months as Bridge Access Program (BAP) is sunseting. These materials will reflect the removal of BAP. Please stay tuned!

# Vaccine Support

## Provider Call Center

Dedicated to medical providers and Local Health Departments in California, specifically addressing questions about State program requirements, enrollment, and vaccine distribution.

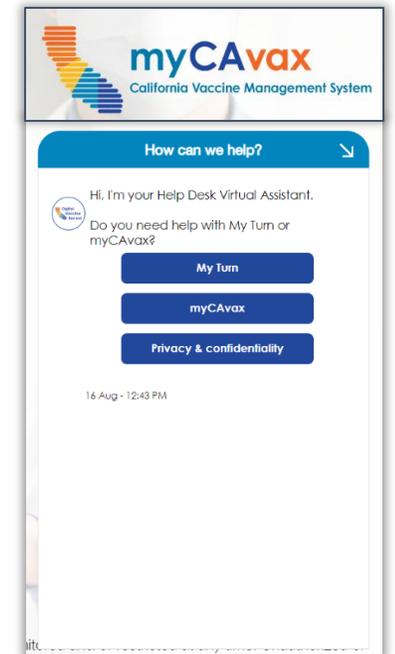
- For myCAvax Help Desk inquiries: [myCAvax.hd@cdph.ca.gov](mailto:myCAvax.hd@cdph.ca.gov)
- For My Turn Clinic Help Desk inquiries: [MyTurn.Clinic.HD@cdph.ca.gov](mailto:MyTurn.Clinic.HD@cdph.ca.gov)
- For all other inquiries: [providercallcenter@cdph.ca.gov](mailto:providercallcenter@cdph.ca.gov)
- Phone: (833) 502-1245, Monday through Friday from 8AM–5PM

## myCAvax

- Virtual Assistant resolves many questions but will direct you to the Provider Call Center queue for live assistance!
- Knowledge Center houses key job aids and videos that are updated every release. Once logged in, you can access job aids from the myCAvax homepage (or at various places throughout the system) using the links as shown below.



Need help? View our job aids in the [Knowledge Center](#), or [contact us](#).



# CAIR2 Resources

## CAIR2 User Guides and Training Videos:

## Regular User ID Guide



### Regular User Guide

Revised: 04/24/2023

The purpose of this User Guide is to provide an overview of the California Immunization Registry (CAIR2) and how to use the features available to CAIR2 Regular users.

For sites using CAIR2 Data Exchange (DX) to send patient information directly to CAIR2 from your EHR/EMR: Most/all the information in this guide can be sent/updated in CAIR2 via your electronic Data Exchange files; therefore, you will not need to enter/update this information in CAIR2 manually. If you are unsure, ask your Manager.

For additional support, the following resources are available:

[Local CAIR2 Representatives \(LCRs\)](http://go.cdph.ca.gov/cair-lcr) (go.cdph.ca.gov/cair-lcr)

**CAIR2 Help Desk:**

Phone: 800-578-7889

Fax: 888-436-8320

Email: [CAIRHelpDesk@cdph.ca.gov](mailto:CAIRHelpDesk@cdph.ca.gov)

[CAIR2 Website](http://cdph.ca.gov/cair) (cdph.ca.gov/cair)

The screenshot shows the California Department of Public Health website. The main navigation bar includes "I am looking for", "I am a", "Programs", and "A-Z Index". Below the navigation bar is a search bar and a breadcrumb trail: Home | Programs | Center for Infectious Diseases | Division of Communicable Disease Control | CAIR | CAIR2 User Guides. The main heading is "CALIFORNIA IMMUNIZATION REGISTRY". On the left is a sidebar menu with items: CAIR, Join CAIR, CAIR Users, Data Exchange, User Guides & Forms, and Finding Records. The main content area is titled "CAIR2 User Guides" and contains two columns of links. The first column, "CAIR2 User Guides", lists: CAIR2 Login and Account Management Guide (PDF), CAIR2 Regular User Guide (PDF), CAIR2 Inventory User (Power) Guide (PDF), CAIR2 Guide to Adding Historical Immunizations (PDF), CAIR2 Guide to Using Manage Patient Status (PDF), CAIR2 Reminder/Recall User Guide (PDF), CAIR2 Organizational Reports User Guide (PDF), CAIR2 Read-Only User Guide (PDF), CAIR2 Read-Only Quick Guide (PDF), CAIR2 TB User Guide (PDF), CAIR2 Manual Entry Guide (PDF) - Sites not using inventory, and CAIR2 Vaccine Transfer User Guide (PDF). The second column, "CAIR2 Training Videos (minutes)", lists: Accessing CAIR (6:32), Managing Patients (10:58), Understanding the History/Recommend Screen (9:46), Adding Historical Immunizations (6:18), Vaccine Inventory (12:13), Adding New Immunization (8:51), Generating Patient-Specific Reports (5:43), Vaccine Transfers (11:35), Generating and Understanding Ad Hoc Reports (12:34), Generating Benchmark and Assessment Reports (19:52), and School and Child Care User (11:56).

# CAIR2 Resources

## Data Exchange Webpage

California Department of Public Health

Home | Programs | Center for Infectious Diseases | Division of Communicable Disease Control | CAIR | Data Exchange

### CALIFORNIA IMMUNIZATION REGISTRY

CAIR

Join CAIR

CAIR Users

**Data Exchange**

User Guides & Forms

Finding Records

### Data Exchange

If your practice uses an Electronic Health Record system (EHR) and would like to send immunization data to CAIR2 electronically, the links below will provide the information your site will need in order to get started.

- [Four Steps To Data Exchange \(DX\)](#)
- [Bidirectional Exchange \(BiDX\)](#)
- [Data Exchange FAQs](#)
- [Data Exchange Resources](#)
- [Managing Inventory](#)
- [Local Data Exchange Contacts](#)
- [Next Steps to Onboarding](#)

### Local Data Exchange Contacts

If you have questions about electronic data exchange between your EHR system and CAIR2, please review the [CAIR2 Data Exchange \(DX\) Frequently Asked Questions](#).

Data Exchange Contact	CAIR Regions Covered	Email	Phone/Fax
Data Exchange Support	CAIR2 Software Regions (See <a href="#">CAIR Software Map</a> ) (PDF)	<a href="mailto:CAIRDataExchange@cdph.ca.gov">CAIRDataExchange@cdph.ca.gov</a>	Only Email Available
CAIR San Joaquin (RIDE) Help Desk	San Joaquin (Alpine, Amador, Calaveras, Mariposa, Merced, San Joaquin, Stanislaus, and Tuolumne counties)	<a href="mailto:support@myhealthyfutures.org">support@myhealthyfutures.org</a>	Phone: 209-468-2292

# Updated Provider Job Aids

- Meningococcal Job Aids

- Recommended Schedules -  
Routine Risk Schedule – updated!

- Vaccine Fact Sheets

- MenACWY
- MenB
- MenABCWY (Penbraya™) - new!

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

## Meningococcal Vaccines for Adolescents & Young Adults: Routine Risk<sup>1</sup>



---

### Routine MenACWY<sup>2,3</sup> for 11-18 years 2 Doses

**MenACWY**  
MenQuadfi® or Menveo®  
Ages 11 or 12 years

8 weeks min. →

**MenACWY**  
MenQuadfi® or Menveo®  
Age 16 years

**Catch-up\*:**

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

---

### Shared Clinical Decision-Making MenB<sup>2</sup> 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 →

**MenB<sup>5</sup>**  
Trumenba®

**• If dose 2 is administered earlier than 6 months, administer 3<sup>rd</sup> dose at least 4 months after dose 2.**

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

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### Pentavalent Vaccine (MenABCWY)<sup>2</sup> Suggested Dosing for 11-23 years 3 Doses

**MenACWY**  
MenQuadfi® or Menveo®  
Ages 11 or 12 years

8 weeks min. →

**MenABCWY**  
Penbraya  
Age 16 years

At least 6 months →

**MenB<sup>5</sup>**  
Trumenba®

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

Notes:

1. 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/r6909a1.htm#T3\_down)
2. 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.
3. MenACWY (MCV4) vaccines protect against serogroups A, C, W-135, and Y.
4. 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.
5. 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)

## Routine Risk Schedule (IMM-1217)

# Updated Vaccine Fact Sheets

## Vaccine Fact Sheet: MenACWY (MCV4)



Topic	MenQuadfi *	Menveo*
<b>Manufacturer</b>	Sanofi Pasteur <a href="#">Detailed Prescribing Information</a>	GSK <a href="#">Detailed Prescribing Information</a>
<b>Protects Against</b>	Invasive meningococcal disease (IMD) caused by <i>Neisseria meningitidis</i> A, C, Y and W-135.	Invasive meningococcal disease (IMD) caused by <i>Neisseria meningitidis</i> A, C, Y and W-135.
<b>Routine Schedule</b>	<b>Children:</b> Two-dose series at 11-12 years and 16 years  <b>Adults:</b> 1 or more doses depending on risk factors.  <b>Refer to:</b> CDPH Meningococcal Vaccine Timing Guide: <a href="#">Routine Risk</a> or <a href="#">High Risk</a>	<b>Children:</b> Two-dose series at 11-12 years and 16 years  <b>Adults:</b> 1 or more doses depending on risk factors.  <b>Refer to:</b> CDPH Meningococcal Vaccine Timing Guide: <a href="#">Routine Risk</a> or <a href="#">High Risk</a>
<b>Minimum Intervals</b>	8 week minimum interval between doses	8 week minimum interval between doses
<b>Approved Ages</b>	2 years of age and older	<ul style="list-style-type: none"> <li>2-vial presentation approved for children 2 months through 55 years. (NDC 58160-0955-09) 2-vial presentation is the only vaccine approved for use in children 2 months through 2 years. Limited supply should be reserved for children 2 months through 2 years of age.</li> <li>1 vial presentation approved for 10 years through 55 years.</li> </ul>
<b>Administration</b>	Intramuscular (IM) injection	Intramuscular (IM) injection
<b>Packaging</b>	Vaccine is packaged as a single-dose vial in packages of 5 vials	Vaccine is packaged as: -2-vials (5 pack) and <b>requires reconstitution</b> before use, OR -1-vial (10 pack) and <b>does not</b> require reconstitution before use See <a href="#">Menveo Vial Presentation</a> job aid.
<b>Storage</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>

[MenACWY \(IMM-1064\)](#)

## Vaccine Fact Sheet: MenB



Topic	Bexsero*	Trumenba*
<b>Manufacturer</b>	GSK <a href="#">Detailed Prescribing Information</a>	Pfizer <a href="#">Detailed Prescribing Information</a>
<b>Protects Against</b>	Invasive meningococcal disease (IMD) caused by <i>Neisseria meningitidis</i> serogroup B	IMD caused by <i>Neisseria meningitidis</i> serogroup B
<b>Routine Schedule</b>	<b>Children:</b> <i>Routine Risk:</i> Two-dose series ≥ 1 month apart at age 16-18; use <a href="#">shared clinical decision-making</a> . <i>High Risk:</i> Two-dose series ≥ 1 month apart (minimum age 10 years)  <b>Adults:</b> <i>Routine Risk:</i> Two-dose series ≥ 1 month apart through age 23; use <a href="#">shared clinical decision-making</a> . <i>High Risk:</i> Two-dose series ≥ 1 month apart  <b>Refer to:</b> CDPH Meningococcal Vaccine Timing Guide: <a href="#">Routine Risk</a> or <a href="#">High Risk</a>	<b>Children:</b> <i>Routine Risk:</i> Two-dose series ≥ 6 months apart at age 16-18; use <a href="#">shared clinical decision-making</a> . <i>High Risk:</i> Three-dose series at 0, 1-2, and 6 months (minimum age 10 years)  <b>Adults:</b> <i>Routine Risk:</i> Two-dose series ≥ 6 months through age 23; use <a href="#">shared clinical decision-making</a> . <i>High Risk:</i> Three-dose series 0, 1-2, and 6 months  <b>Refer to:</b> CDPH Meningococcal Vaccine Timing Guides for <a href="#">Routine Risk</a> or <a href="#">High Risk</a>
<b>Minimum Intervals</b>	4 week minimum interval between dose 1 and 2	4 week minimum interval between dose 1 and 2, 16 week minimum interval between dose 1 and 3 (high-risk)
<b>Approved Ages</b>	Persons aged 10 through 25 years old	Persons aged 10 through 25 years old
<b>Administration</b>	Intramuscular (IM) injection	Intramuscular (IM) injection
<b>Packaging</b>	Vaccine is packaged as: -10 single-dose 0.5mL syringes, OR -1 single-dose 0.5mL syringe per carton	Vaccine is packaged as: -10 single-dose 0.5mL syringes, OR -5 single-dose 0.5mL syringes
<b>Storage</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>	Refrigerate between 36°F and 46°F (2°C to 8°C) <b>Do not freeze</b>
<b>Full ACIP Recommendations</b>	<a href="#">ACIP Meningococcal Vaccine Recommendations</a>	<a href="#">ACIP Meningococcal Vaccine Recommendations</a>
<b>VFC Letter</b>	<a href="#">VFC MenB Vaccine Clinical Letter</a>	<a href="#">VFC MenB Vaccine Clinical Letter</a>

[MenB \(IMM-1219\)](#)

## Vaccine Fact Sheet: MenACWY-MenB



Topic	Penbraya™
<b>Manufacturer</b>	Pfizer <a href="#">Detailed Prescribing Information</a>
<b>Protects Against</b>	Invasive meningococcal disease (IMD) caused by <i>N. meningitidis</i> * serogroups A, B, C, W, and Y.
<b>Routine Schedule &amp; Intervals</b>	<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"> <li>16 - 18 years (routine) when shared clinical decision-making favors MenB.</li> <li>10 - 25 years at increased risk: <ul style="list-style-type: none"> <li>persistent complement deficiencies, taking complement inhibitors, and anatomic or functional asplenia, including sickle cell disease.</li> </ul> </li> </ul> <p>Suggested routine dosing:</p> <ul style="list-style-type: none"> <li>dose 1 (11-12 yrs) = Menveo (MenACWY-CRM) or MenQuadfi (MenACWY-TT)</li> <li>dose 2 (16-18 yrs) = Penbraya (MenACWY-TT/MenB-FHbp)</li> <li>dose 3 (16-18 yrs) = Trumenba (MenB-FHbp)</li> </ul> <p>The MenB component in Penbraya is Trumenba (MenB-FHbp). MenB brands are not interchangeable. If a patient receives Penbraya™ (MenACWY) 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: <a href="#">CDPH Meningococcal Vaccine Timing Guide: Routine Risk High Risk</a></p>
<b>Minimum Intervals</b>	6-month interval between doses
<b>Approved ages</b>	10 years - 25 years of age
<b>Administration</b>	Intramuscular (IM) injection
<b>Packaging</b>	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.  To prepare vaccine for administration, <b>reconstitute</b> the Lyophilized MenACWY Component with the MenB Component. (Approximately 0.5mL each dose after reconstitution).
<b>Storage</b>	<b>Before reconstitution:</b> 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. <b>Do not freeze. Discard if the carton has been frozen.</b>

[MenABCWY \(IMM-1533\)](#) - new!

# Flu IZ Guide Updated for 2024-25 Season

INFLUENZA VACCINE PRODUCT GUIDE 2024-2025			
6 MONTHS & OLDER	 <p><b>Fluarix® Trivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe</p>	 <p><b>FluLaval® Trivalent</b> GlaxoSmithKline Biologicals 0.5 mL single-dose syringe</p>	
	 <p><b>Flucelvax® Trivalent</b> Seqirus 0.5 mL single-dose syringe</p>		 <p><b>Fluzone® Trivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose</p>
	 <p><b>Afluria® Trivalent</b> Seqirus 5.0 mL multi-dose vial*</p>		
3 YEARS & OLDER	 <p><b>Afluria® Trivalent</b> Seqirus 0.5 mL single-dose syringe</p>	 <p><b>Fluzone® Trivalent</b> Sanofi Pasteur, Inc. 5.0 mL multi-dose vial*</p>	
2-49 YEARS OLD & HEALTHY	 <p><b>FluMist® Trivalent</b> Astrazeneca 0.2 mL single-dose nasal sprayer</p>	<p><b>65 YEARS &amp; OLDER</b></p>  <p><b>FLUAD® Adjuvanted Trivalent Syngene</b> 0.5 mL single-dose syringe</p>	
18 YEARS & OLDER	 <p><b>FluBlok® Trivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose syringe</p>		 <p><b>Fluzone® High-Dose Trivalent</b> Sanofi Pasteur, Inc. 0.5 mL single-dose syringe</p>

**STORE ALL INFLUENZA VACCINES IN THE REFRIGERATOR.**  
**VFC Questions:**  
 Call 877-2Get-VFC (877-243-8832)  
 State General Fund (SGF) Flu Program participants can contact: [sgfvaccine@cdph.ca.gov](mailto:sgfvaccine@cdph.ca.gov)

Children under 9 years of age with a history of fewer than 2 doses of influenza vaccine are recommended to receive 2 doses this flu season. See [CDC Website](#)

▽ Vaccines available through the Vaccines for Children Program in 2024-25 should only be used for VFC-eligible children 18 years of age or younger.

\* Multi-dose flu vaccines, which contain thimerosal, should NOT be given to pregnant women and children under 3 years of age unless Secretary of the Health and Human Services Agency issues an exemption (CA Health & Safety Code 124172).

65+ Preferred vaccine product for persons 65 or older. If not available, any other age-appropriate inactivated product may be given.

California Department of Public Health  IMM-859 (8/24)

## Influenza Vaccination ID Guide 2024-2025 (IMM-859)

# Respiratory Diseases Materials

- [Flu and Respiratory Diseases EZIZ Page](#)
- [Respiratory Diseases IZ Timing Guide - https://eziz.org/assets/docs/IMM-1527.pdf](https://eziz.org/assets/docs/IMM-1527.pdf)
- [Protect Against Respiratory Viruses for Older Adults flyer](#) - new! (pictured here)

**Protect Yourself from Respiratory Viruses**

Older adults, especially those with weakened immune systems, are at greater risk for getting very sick from respiratory viruses. Take these steps to lower your risk.

**Stay Up to Date on Vaccines**

As we get older, we need updated vaccines to keep our immune systems healthy and strong. Vaccines are our best protection against severe illness, hospitalization, and death from **flu, COVID-19, and RSV**.

Talk to your health care provider to make sure you're **up to date on all your vaccines!**

**Get COVID-19 and Flu Treatments**

If you have symptoms, contact your health care provider to get tested (or take an at-home COVID-19 test). If you test positive, ask your health care provider about prescription treatments to prevent symptoms from getting serious. **Act fast, most of these medications must be taken within the first 5 days** of symptoms.

**Consider Extra Precautions to Prevent Spread**

- Wear a mask in crowded indoor spaces
- Increase ventilation by opening windows and doors
- Stay away from others if you're sick
- Wash your hands often
- Cover your cough or sneeze

**Need more info?** [go.cdph.ca.gov/respiratory-viruses](https://go.cdph.ca.gov/respiratory-viruses)

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# August is National Immunization Awareness Month!

NIAM



**National Immunization Awareness Month**  
#Ivax2Protect

National Immunization Awareness Month CDC



Help Protect Yourself and Your Baby  
**TALK TO A HEALTHCARE PROVIDER YOU TRUST**

ABOUT VACCINES

National Immunization Awareness Month CDC



Protege momentos preciosos

**MANTENTE AL DÍA CON LAS VACUNAS DE RUTINA**

Mes Nacional de Concientización sobre la Vacunación CDC

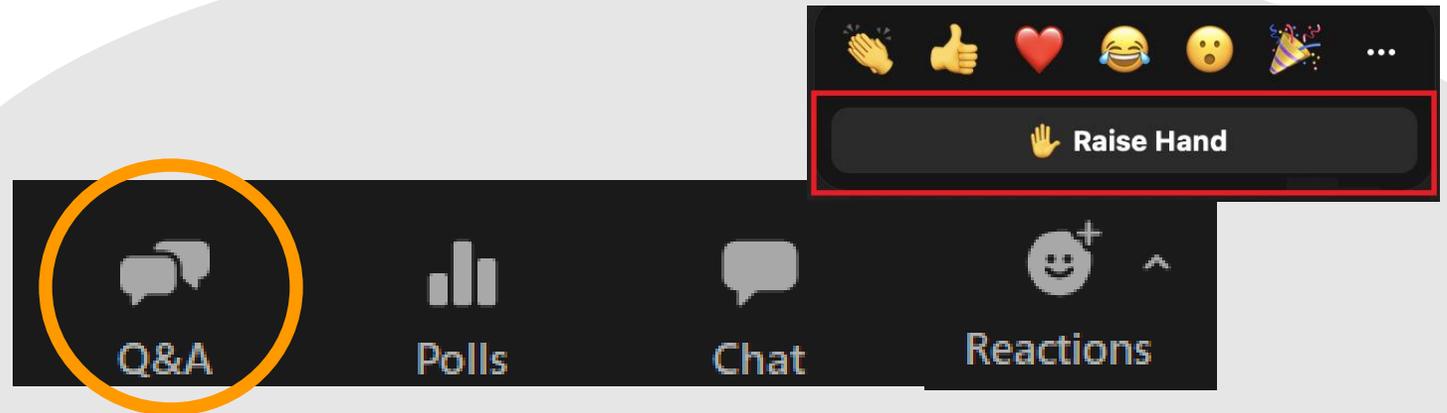


**National Immunization Awareness Month**

# Question & Answer Session



Please use the Q&A panel to ask your questions or use the Raise Hand feature so VFA program staff can respond directly.



# Thank You!

Please fill out this short VFA webinar evaluation here:

<https://forms.office.com/g/kx1TswdT7m>

For post webinar questions, please email us:

[my317vaccines@cdph.ca.gov](mailto:my317vaccines@cdph.ca.gov)

For all other questions email:

[ProviderCallCenter@cdph.ca.gov](mailto:ProviderCallCenter@cdph.ca.gov) or

[my317vaccines@cdph.ca.gov](mailto:my317vaccines@cdph.ca.gov)



California Department of Public Health  
**Immunization Branch**