
Vaccines for Adults Webinar: Adult Immunization Update



Immunization Branch,
California Department of Public Health
March 11, 2020

Q&A

Type and send questions using the chat box as we move through the presentation



The image shows a chat box window with a title bar that says "Chat" and a close button (X). The main area is a large empty text field. At the bottom, there is a "Send to:" dropdown menu currently set to "Host", a text input field, and a "Send" button.

All lines will be unmuted for a Q&A session at the end

- If you are not asking a question, please enter *6 or press the mute button to mute your line.
- To unmute, press *6 or the mute button again.

Agenda

- Describe current ACIP recommendations for adult immunizations
- Program Updates
- Reminders

ACIP RECOMMENDATIONS FOR ADULT IMMUNIZATIONS

CORA HOOVER, MD, MPH

Which shots should I order?

Select Condition:

HIV infection CD4 count < 200

Vaccine *	Results from Selection Above
IIV or RIV or LAIV	1 dose annually CONTRAINDICATED
Tdap or Td	1 dose Tdap, then Td booster every 10 yrs
MMR	CONTRAINDICATED
VAR	CONTRAINDICATED
RZV (preferred) or ZVL	CONTRAINDICATED
HPV-Female	3 doses through age 26 yrs
HPV-Male	3 doses through age 26 yrs
PCV13	1 dose
PPSV23	1, 2, or 3 doses depending on age and indication
HepA	2 or 3 doses depending on



➤ ACIP Adult Immunization Schedule table

➤ CDC Vaccine Schedules app

➤ AAFP Vaccine Schedules app

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2020

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV) or Influenza live, attenuated (LAIV)	1 dose annually			
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap, then Td or Tdap booster every 10 years			
Measles, mumps, rubella (MMR)	1 or 2 doses depending on indication (if born in 1957 or later)			
Varicella (VAR)	2 doses (if born in 1980 or later)		2 doses	
Zoster recombinant (RZV) (preferred) or Zoster live (ZVL)			2 doses or 1 dose	
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal conjugate (PCV13)	1 dose			65 years and older
Pneumococcal polysaccharide (PPSV23)	1 or 2 doses depending on indication			1 dose
Hepatitis A (HepA)	2 or 3 doses depending on vaccine			
Hepatitis B (HepB)	2 or 3 doses depending on vaccine			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
<i>Haemophilus influenzae</i> type b (Hib)	1 or 3 doses depending on indication			

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Recommended vaccination based on shared clinical decision-making

No recommendation/Not applicable

Selected Age-Based Recommendations



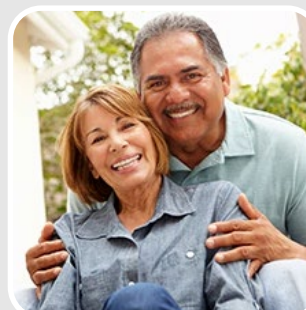
Everyone

- Flu
- Tdap/Td



Younger ≤ 26

- HPV



Older ≥ 50

- Zoster



Older ≥ 65

- PPSV23

See ACIP table for full recommendations

Table 2 Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count		Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men
			<200	≥200							
IIV or RIV or LAIV											
Tdap or Td	1 dose Tdap each pregnancy										
MMR											
VAR											
RZV (preferred) or ZVL	DELAY										
HPV	DELAY										
PCV13											
PPSV23											
HepA											
HepB											
MenACWY											
MenB											
Hib											

 Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection
 Recommended vaccination for adults with an additional risk factor or another indication
 Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction
 Delay vaccination until after pregnancy if vaccine is indicated
 Not recommended/contraindicated—vaccine should not be administered
 No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Assess for Indications

Chronic Disease

- Diabetes
- ESRD on hemodialysis
- Chronic liver disease
- Heart disease
- Lung disease
- Alcohol use disorder



Immunocompromised

- HIV
- Non-HIV immunosuppression
- Asplenia



Behavior or Social Conditions

- MSM
- Drug use
- Homelessness



Occupational

- Health care workers
- Special workplace exposures



Highlights: Recent Adult Immunization Schedule Updates

- **HPV:**
 - Catch-up vaccination for **all adults** up to 26 years
 - *Shared clinical decision-making* for adults 27-45 years
- **PCV13:**
 - *Shared clinical decision-making* for non-immunocompromised adults ≥ 65 years
- **Hepatitis A:**
 - *Routine vaccination* for people with HIV ≥ 1 year old
 - *Routine vaccination* for all people experiencing homelessness

Shared Clinical Decision-Making

- Shared clinical decision-making means there is no “default” for whether or not to vaccinate
- The decision about whether or not to vaccinate is based on provider discretion and an understanding of the individual patient’s characteristics, values, and preferences
- Helpful to understand which specific patients may benefit from immunization
- It’s up to providers to decide whether to raise the issue (but be prepared for patients to raise it as well)
- Visit [CDC Shared Clinical Decision-Making FAQs](#) for more info

HPV Update

New Recommendation	Old Recommendation
Catch-up vaccination: -all adults up to 26	Catch-up vaccination: -men up to 21 -women up to 26
Shared clinical decision-making: -adults 27-45	No recommendation

Priority is catch-up immunization of young men and women!

Shared Clinical Decision-Making for HPV

- ACIP **did not** recommend catch-up vaccination for all adults aged 27 through 45 years
 - Public health benefit of HPV vaccination in this age group is minimal
 - **Shared clinical decision-making** is recommended because some persons who are not adequately vaccinated might benefit
 - Does not need to be addressed with every patient
 - Considerations include likelihood of past and future HPV exposure

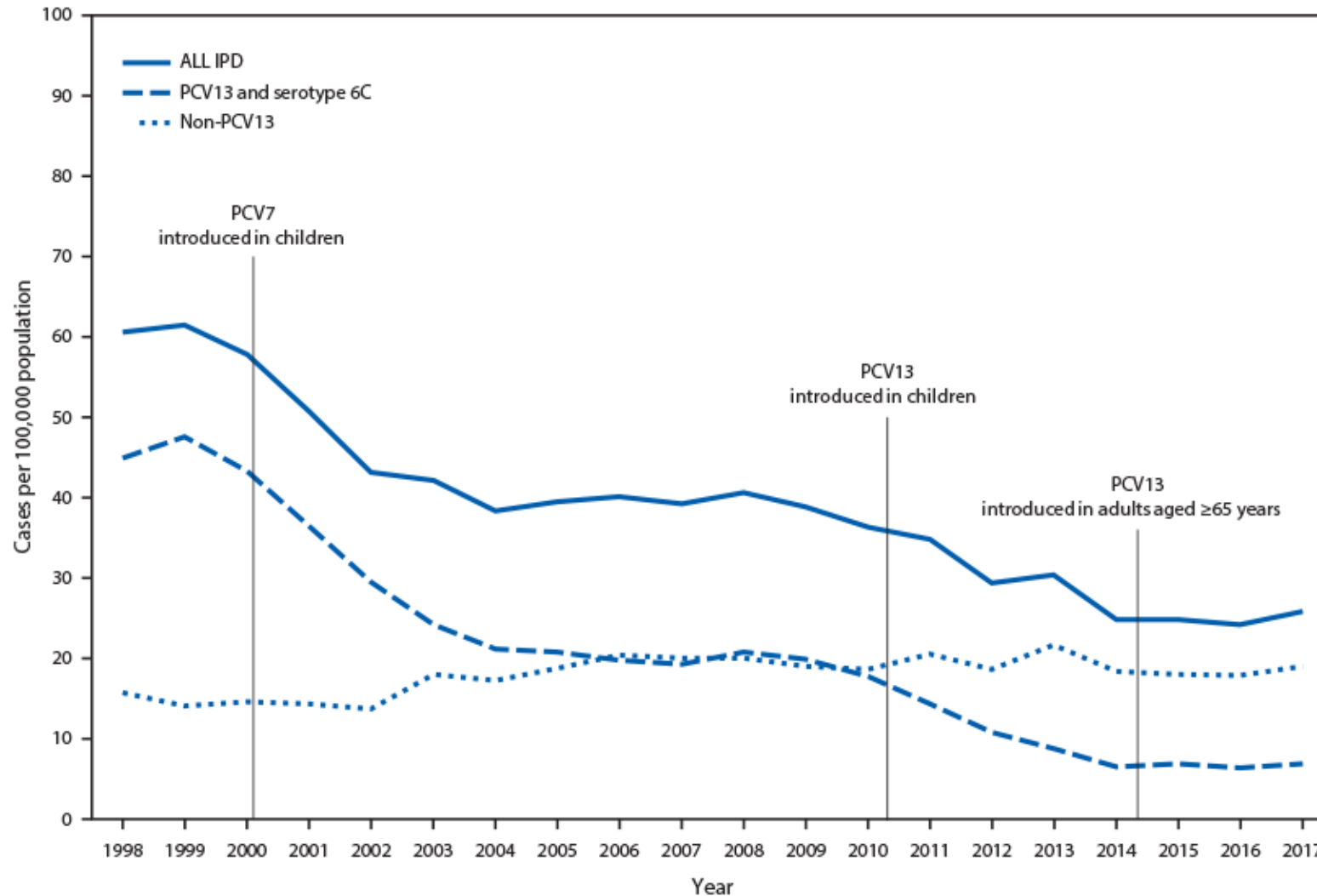
PCV13 Update

New Recommendation	Old Recommendation
Shared clinical decision-making: -non-immunocompromised adults \geq 65 years	Routine vaccination: -non-immunocompromised adults \geq 65 years

- Background:
 - Decreased burden of pneumococcal disease, indirect effect of pediatric PCV13
 - PCV13 serotypes: only ~4% of disease burden
 - Minimal public health benefit of PCV13 vaccination in this age group
- Immunocompromised adults (all ages) should still be immunized

Decreased PCV13 Burden & Pedi Immunization

Invasive Pneumococcal Disease (IPD) in Adults ≥ 65 by Pneumococcal Serotype



Source: Active Bacterial Core Surveillance, unpublished data, 2019.

Shared Clinical Decision-Making for PCV13

- Risk for PCV13-type pneumococcal disease depends on underlying medical conditions and risk of exposure to PCV13 serotypes
- Groups of special concern include
 - Residents of nursing homes and LTCFs
 - Patients with chronic conditions such as heart, lung, and liver disease
- Note that absolute risk for PCV13-type disease in these groups is still low

A note on MMR

- One MMR dose is recommended for adults born in 1957 or later if they don't have evidence of immunity (serology or record of vaccine).
BUT...most adults have been immunized!
 - Adults born after 1970 (in any country) who attended primary or secondary school in the United States are likely to have been immunized
 - Adults born outside the US before 1970 are also likely to be measles immune
- Measles/Rubella IgG can be checked depending on clinical priorities
- As long as no contraindications, acceptable to immunize if no documentation of prior doses
- Some groups should have 2 documented MMR doses: HCWs, college students, international travelers

A note on Varicella

- Two doses of varicella vaccine are recommended for adults born in 1980 or later, unless there is evidence of immunity
- As long as no contraindications, acceptable to immunize if no evidence of immunity
- HCWs and post-partum women need evidence of immunity or two doses of vaccine, no matter when and where they were born
- Evidence of immunity
 - US born before 1980 (except for pregnant women and HCWs)
 - Documentation of two doses of varicella-containing vaccine
 - Diagnosis of varicella or zoster by a healthcare provider
 - Laboratory evidence of immunity or disease

Dealing with Uncertain Vaccination Status

- Only accept written, dated records as documentation of vaccination, **except for** influenza and PPSV23: self-reported doses are acceptable for these two vaccines.
- **Do not postpone vaccination.** If records cannot be located within a reasonable time, start on the age-appropriate vaccination schedule.
- Serologic testing for immunity is a potential alternative to vaccination for certain antigens (e.g., measles, rubella, varicella, hepatitis A, hepatitis B).
 - **It's acceptable to immunize rather than checking serology, especially if follow-up is an issue.**

CLINICAL SCENARIOS

2020 Adult Immunization Schedule



Scenario 1

Andre is a 28-year-old man who is sexually active with men and women.

Which vaccines do you recommend?

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2020

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV) or Influenza live, attenuated (LAIV)		1 dose annually		
Tetanus, diphtheria, pertussis (Tdap or Td)		1 dose Tdap, then Td or Tdap booster every 10 years		
Measles, mumps, rubella (MMR)		1 or 2 doses depending on indication (if born in 1957 or later)		
Varicella (VAR)		2 doses (if born in 1980 or later)	2 doses	
Zoster recombinant (RZV) (preferred) or Zoster live (ZVL)			2 doses	1 dose
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	through 45 years		
Pneumococcal conjugate (PCV13)		1 dose		65 years and older
Pneumococcal polysaccharide (PPSV23)		1 or 2 doses depending on indication		1 dose
Hepatitis A (HepA)		2 or 3 doses depending on vaccine		
Hepatitis B (HepB)		2 or 3 doses depending on vaccine		
Meningococcal A, C, W, Y (MenACWY)		1 or 2 doses depending on indication, see notes for booster recommendations		
Meningococcal B (MenB)	19 through 23 years	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations		
<i>Haemophilus influenzae</i> type b (Hib)		1 or 3 doses depending on indication		

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Recommended vaccination based on shared clinical decision-making

No recommendation/Not applicable

Table 2

Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count		Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men
			<200	≥200							
IIV or RIV or LAIV											1 dose annually
					NOT RECOMMENDED		PRECAUTION			1 dose annually	or
Tdap or Td	1 dose Tdap each pregnancy										1 dose Tdap, then Td or Tdap booster every 10 years
MMR		NOT RECOMMENDED									1 or 2 doses depending on indication
VAR		NOT RECOMMENDED									2 doses
RZV (preferred) or ZVL	DELAY										2 doses at age ≥50 years
		NOT RECOMMENDED									1 dose at age ≥60 years
HPV	DELAY				3 doses through age 26 years						2 or 3 doses through age 26 years
PCV13											1 dose
PPSV23											1, 2, or 3 doses depending on age and indication
HepA											2 or 3 doses depending on vaccine
HepB											2 or 3 doses depending on vaccine
MenACWY											1 or 2 doses depending on indication, see notes for booster recommendations
MenB	PRECAUTION										2 or 3 doses depending on vaccine and indication, see notes for booster recommendations
Hib											3 doses HSCT ³ recipients only
											1 dose

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction

Delay vaccination until after pregnancy if vaccine is indicated

Not recommended/contraindicated—vaccine should not be administered

No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Scenario 1

Andre is a 28-year-old man who is sexually active with men and women. Which vaccines do you recommend?



Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y)
Hepatitis A	MSM
Hepatitis B	MSM
HPV (if not previously immunized)	Shared clinical decision-making *

** Clinicians should consider discussing HPV vaccination with adults aged 27 through 45 who are most likely to benefit in a process of shared clinical decision-making.*

Grace is 30 years old and hoping to get pregnant in the next year. She currently has the Mirena IUD. Which vaccines do you recommend?

Note: Grace was born in 1990. She does not remember having had chicken pox and has no childhood immunization records. She immigrated from the Philippines 10 years ago.



Scenario 2

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2020

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV) or Influenza live, attenuated (LAIV)		1 dose annually		
Tetanus, diphtheria, pertussis (Tdap or Td)		1 dose Tdap, then Td or Tdap booster every 10 years		
Measles, mumps, rubella (MMR)		1 or 2 doses depending on indication (if born in 1957 or later)		
Varicella (VAR)	2 doses	2 doses if born in 1980 or later		2 doses
Zoster recombinant (RZV) (preferred) or Zoster live (ZVL)				2 doses or 1 dose
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	through 45 years		
Pneumococcal conjugate (PCV13)		1 dose		65 years and older
Pneumococcal polysaccharide (PPSV23)		1 or 2 doses depending on indication		1 dose
Hepatitis A (HepA)		2 or 3 doses depending on vaccine		
Hepatitis B (HepB)		2 or 3 doses depending on vaccine		
Meningococcal A, C, W, Y (MenACWY)		1 or 2 doses depending on indication, see notes for booster recommendations		
Meningococcal B (MenB)	19 through 23 years	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations		
<i>Haemophilus influenzae</i> type b (Hib)		1 or 3 doses depending on indication		

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Recommended vaccination based on shared clinical decision-making

No recommendation/Not applicable



Scenario 2

Grace is 30 years old and hoping to get pregnant in the next year. She currently has the Mirena IUD. Which vaccines do you recommend?

Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y)
MMR	If no evidence of immunity
Varicella	If no evidence of immunity
HPV (if not previously immunized)	Shared clinical decision-making *

** Clinicians should consider discussing HPV vaccination with adults aged 27 through 45 most likely to benefit in a process of shared clinical decision-making.*



Scenario 3

Lucy is a 55-year-old woman with diabetes and asthma.

Which vaccines do you recommend?

Table 1 Recommended Adult Immunization Schedule by Age Group, United States, 2020

Vaccine	19–26 years	27–49 years	50–64 years	≥65 years
Influenza inactivated (IIV) or Influenza recombinant (RIV) or Influenza live, attenuated (LAIV)	1 dose annually		✓	
Tetanus, diphtheria, pertussis (Tdap or Td)	1 dose Tdap, then Td or Tdap booster every 10 years		✓	
Measles, mumps, rubella (MMR)	1 or 2 doses depending on indication (if born in 1957 or later)			
Varicella (VAR)	2 doses (if born in 1980 or later)			2 doses
Zoster recombinant (RZV) (preferred) or Zoster live (ZVL)			✓	2 doses or 1 dose
Human papillomavirus (HPV)	2 or 3 doses depending on age at initial vaccination or condition	27 through 45 years		
Pneumococcal conjugate (PCV13)	1 dose			65 years and older
Pneumococcal polysaccharide (PPSV23)	1 or 2 doses depending on indication			1 dose
Hepatitis A (HepA)	2 or 3 doses depending on vaccine			
Hepatitis B (HepB)	2 or 3 doses depending on vaccine			
Meningococcal A, C, W, Y (MenACWY)	1 or 2 doses depending on indication, see notes for booster recommendations			
Meningococcal B (MenB)	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations			
Haemophilus influenzae type b (Hib)	1 or 3 doses depending on indication			

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Recommended vaccination based on shared clinical decision-making

No recommendation/ Not applicable

Table 2

Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count	Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men
			<200	≥200						
IIV or RIV or LAIV						1 dose annually				
						NOT RECOMMENDED	PRECAUTION		1 dose annually	
Tdap or Td	1 dose Tdap each pregnancy					1 dose Tdap, then Td or Tdap booster every 10 years				
MMR						1 or 2 doses depending on indication				
VAR						2 doses				
RZV (preferred) or ZVL	DELAY					2 doses at age ≥50 years or 1 dose at age ≥60 years				
						NOT RECOMMENDED				
HPV	DELAY	3 doses through age 26 years				2 or 3 doses through age 26 years				
PCV13						1 dose				
PPSV23						1, 2, or 3 doses depending on age and indication				
HepA						2 or 3 doses depending on vaccine				
HepB						2 or 3 doses depending on vaccine				
MenACWY						1 or 2 doses depending on indication, see notes for booster recommendations				
MenB	PRECAUTION					2 or 3 doses depending on vaccine and indication, see notes for booster recommendations				
Hib		3 doses HSCT ³ recipients only			1 dose					

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction

Delay vaccination until after pregnancy if vaccine is indicated

Not recommended/contraindicated—vaccine should not be administered

No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Scenario 3

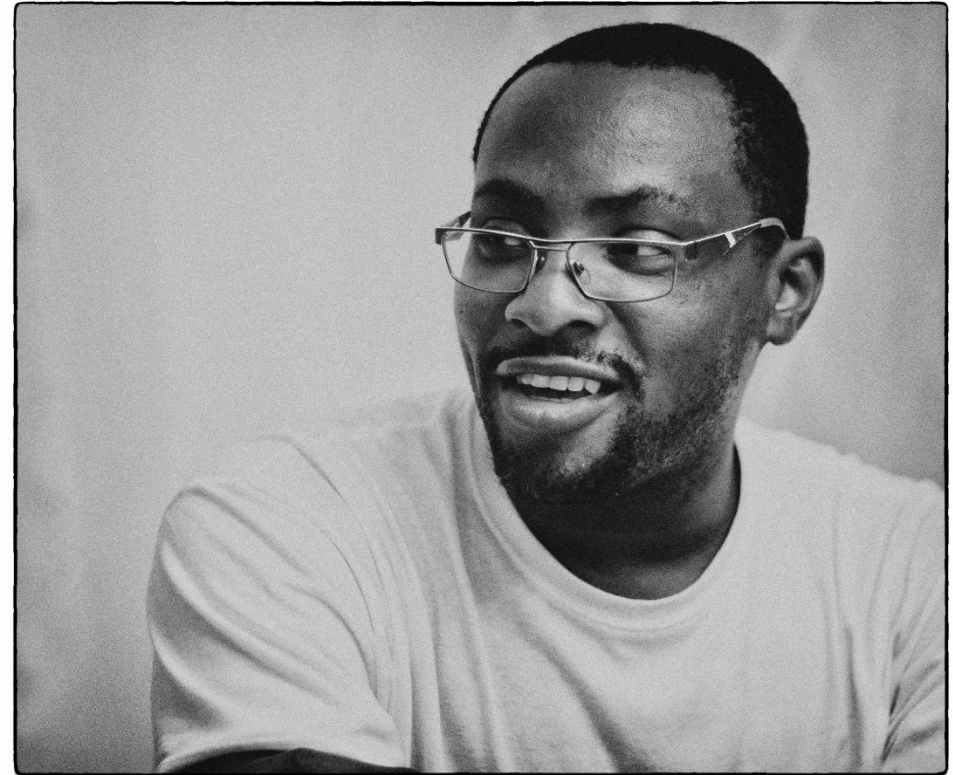
Lucy is a 55-year-old woman with diabetes and asthma. Which vaccines do you recommend?



Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y booster)
Zoster (RZV)	All adults ≥ 50
PPSV23	Diabetes
Hepatitis B	Diabetes

Jonah is a 38-year-old man with sickle cell disease.

Which vaccines do you recommend?



Scenario 4

Table 2

Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count		Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men
			<200	≥200							
IIV or RIV or LAIV					✓						
Tdap or Td	1 dose Tdap each pregnancy				✓						
MMR											
VAR											
RZV (preferred) or ZVL	DELAY										
HPV	DELAY										
PCV13					✓						
PPSV23					✓						
HepA											
HepB											
MenACWY					✓						
MenB	PRECAUTION				✓						
Hib					✓						

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction

Delay vaccination until after pregnancy if vaccine is indicated

Not recommended/contraindicated—vaccine should not be administered

No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Scenario 4

Jonah is a 38-year-old man with sickle cell disease. Which vaccines do you recommend?



Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y booster)
PCV13	Asplenia
PPSV23	Asplenia
MenACWY	Asplenia
MenB	Asplenia
Hib	Asplenia



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Scenario 5

Tanya is a 26-year-old woman who is a medical assistant.

Which vaccines do you recommend?

Table 2

Recommended Adult Immunization Schedule by Medical Condition and Other Indications, United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count		Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men	
			<200	≥200								
IIV or RIV or LAIV	1 dose annually									✓	or 1 dose annually	
	NOT RECOMMENDED					PRECAUTION						
Tdap or Td	1 dose Tdap each pregnancy	1 dose Tdap, then Td or Tdap booster every 10 years									✓	
MMR	NOT RECOMMENDED			1 or 2 doses depending on indication						✓		
VAR	NOT RECOMMENDED			2 doses						✓		
RZV (preferred) or ZVL	DELAY				2 doses at age ≥50 years					or 1 dose at age ≥60 years		
	NOT RECOMMENDED											
HPV	DELAY	3 doses through age 26 years			2 or 3 doses through age 26 years					✓		
PCV13		1 dose										
PPSV23		1, 2, or 3 doses depending on age and indication										
HepA					2 or 3 doses depending on vaccine							
HepB						2 or 3 doses depending on vaccine				✓		
MenACWY	1 or 2 doses depending on indication, see notes for booster recommendations											
MenB	PRECAUTION	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations										
Hib		3 doses HSCT ³ recipients only			1 dose							

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection

Recommended vaccination for adults with an additional risk factor or another indication

Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction

Delay vaccination until after pregnancy if vaccine is indicated

Not recommended/contraindicated—vaccine should not be administered

No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Scenario 5

Tanya is a 26-year-old woman who is a medical assistant. Which vaccines do you recommend?



Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y booster); as HCW, should receive pertussis vaccine
Hepatitis B	Health Care Worker
HPV	Age ≤ 26
Varicella	Health Care Worker
MMR	Health Care Worker

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Scenario 6

Luis is a 50-year-old man with HIV (CD4 <200), cirrhosis, and COPD. He is also MSM.

Which vaccines do you recommend?

Table 2 Recommended Adult Immunization Schedule by Medical Condition and Other Indications¹ United States, 2020

Vaccine	Pregnancy	Immuno-compromised (excluding HIV infection)	HIV infection CD4 count		Asplenia, complement deficiencies	End-stage renal disease; or on hemodialysis	Heart or lung disease, alcoholism ¹	Chronic liver disease	Diabetes	Health care personnel ²	Men who have sex with men
			<200	≥200							
✓ IIV or RIV or LAIV	1 dose annually				1 dose annually						
	NOT RECOMMENDED					PRECAUTION			1 dose annually		
✓ Tdap or Td	1 dose Tdap each pregnancy	1 dose Tdap, then Td or Tdap booster every 10 years									
MMR	NOT RECOMMENDED					1 or 2 doses depending on indication					
VAR	NOT RECOMMENDED					2 doses					
✓ RZV (preferred) or ZVL	DELAY				2 doses at age ≥50 years						
	NOT RECOMMENDED					1 dose at age ≥60 years					
HPV	DELAY	3 doses through age 26 years				2 or 3 doses through age 26 years					
✓ PCV13		1 dose									
✓ PPSV23		1, 2, or 3 doses depending on age and indication									
✓ HepA						2 or 3 doses depending on vaccine					
✓ HepB						2 or 3 doses depending on vaccine					
✓ MenACWY	1 or 2 doses depending on indication, see notes for booster recommendations										
MenB	PRECAUTION	2 or 3 doses depending on vaccine and indication, see notes for booster recommendations									
Hib		3 doses HSCT ³ recipients only			1 dose						

Recommended vaccination for adults who meet age requirement, lack documentation of vaccination, or lack evidence of past infection
 Recommended vaccination for adults with an additional risk factor or another indication
 Precaution—vaccination might be indicated if benefit of protection outweighs risk of adverse reaction
 Delay vaccination until after pregnancy if vaccine is indicated
 Not recommended/contraindicated—vaccine should not be administered
 No recommendation/Not applicable

1. Precaution for LAIV does not apply to alcoholism. 2. See notes for influenza; hepatitis B; measles, mumps, and rubella; and varicella vaccinations. 3. Hematopoietic stem cell transplant.

Scenario 6

Luis is a 50-year-old man with HIV (CD4 <200), cirrhosis, and COPD. He is also MSM. Which vaccines do you recommend?

Vaccine	Indication
Flu	All ages
Tdap/Td	All ages (every 10y booster)
Zoster (RZV)	Age \geq 50
PCV13	HIV
PPSV23	HIV, chronic liver disease, lung disease
Hep A	HIV, chronic liver disease, MSM
Hep B	HIV, chronic liver disease, MSM
MenACWY	HIV



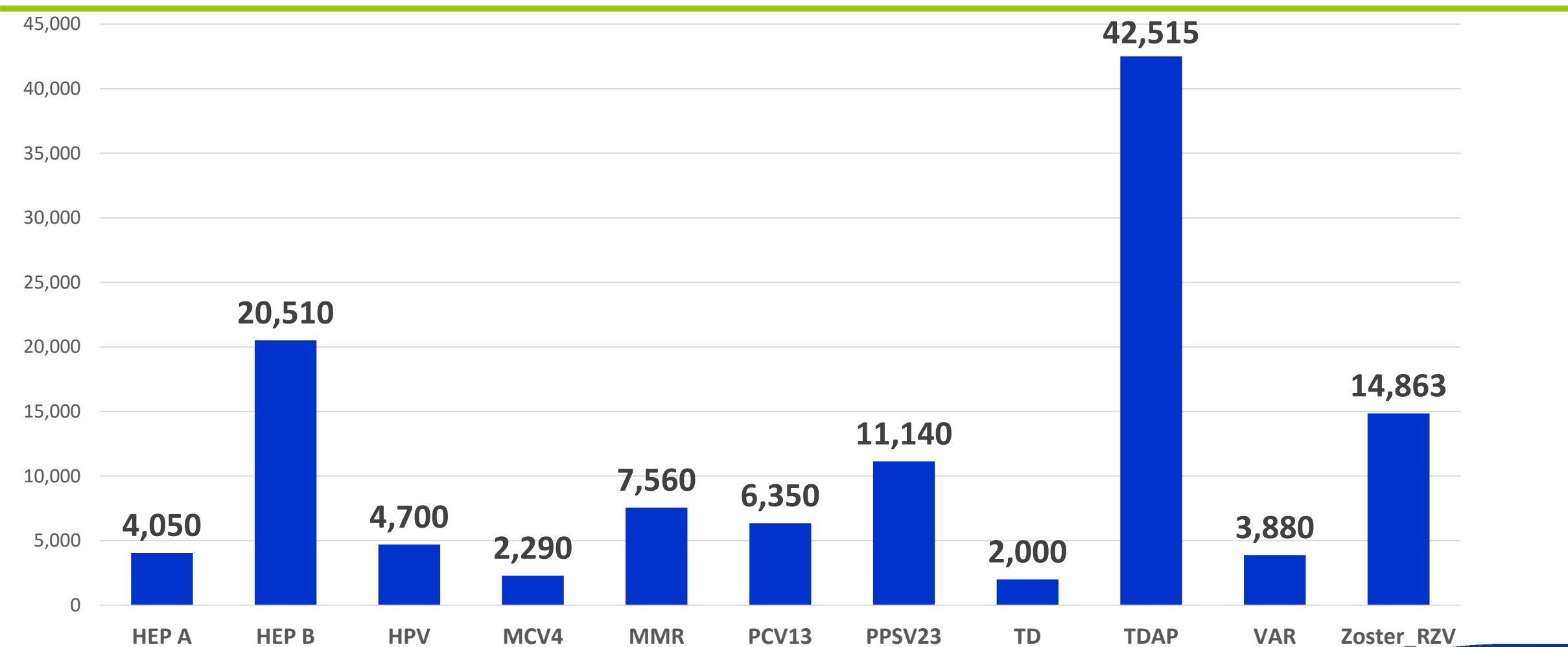
VFA Program Updates

- 409 VFA providers in the program
- 2019 evaluation surveys have been reviewed and summary will be shared at the next webinar
- Quality Assurance visits will continue in 2020—small number of sites will be selected

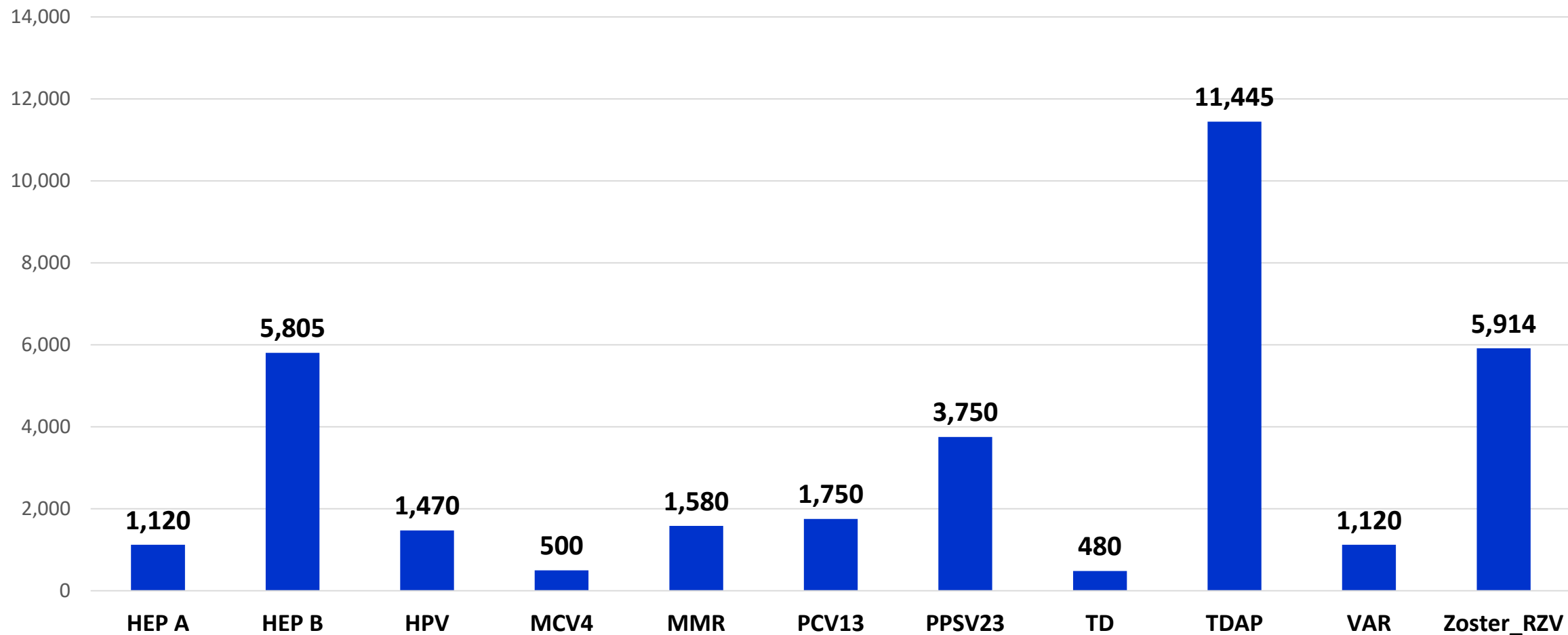
Keep VFA and VFC Contact Information Updated

- Staff changes?
 - Take all required EZIZ trainings
 - Ensure contact info is up to date in your myVFCvaccines profile
- Don't miss important VFA communications!
 - VFA communications are sent to the latest contacts listed in your myVFCvaccines profile.

VFA Ordering in 2019 by Vaccine Type



VFA Vaccine Orders, Q1 2020



2020 Vaccine Ordering

- Next ordering period: April 6-17
- Due to the limited budget, the VFA program is closely monitoring ordering of the following:
 - PCV13
 - HPV
 - Herpes Zoster
- Reminder – Patient Assistance Programs are available through vaccine manufacturers

Provider Resources

- [2020 Adult Immunization Schedule](#)
- NFID Webinar: Shared Clinical Decision-Making For Immunization Recommendations
 - [Recording](#)
 - [Slides](#)
- [Shared Clinical Decision-Making FAQs](#)
- [ACIP General Best Practices Updates](#) (Harmonization with ACIP Vaccine-Specific Recommendations)

Free Vaccines

Updated!



Ask us about getting these vaccines for free* if:

- **You are uninsured or**
- **Your insurance doesn't cover these vaccines**

* No charge for getting the vaccine or for the cost of the vaccine. Check with office staff as other fees may apply.

VFA
California Vaccines for Adults Program

CDC
California Department of Public Health Immunization Branch

☐ Hepatitis A
☐ Hepatitis B
☐ Human Papillomavirus
☐ Meningitis
☐ Measles, Mumps, Rubella
☐ Pneumonia
☐ Tetanus, Diphtheria
☐ Tetanus, Diphtheria, Whooping Cough
☐ Chickenpox
☐ Shingles

Patient Resources

bit.do/VFAresources

50+?
Protect Against Shingles!



What is Shingles?

- Shingles is a painful rash that can cause long-term nerve pain.
- 1 out of 3 people in the U.S. will get shingles. Your risk goes up as you age.
- Serious complications include pain that can last for months.

Get 2-doses of the New Shingles Vaccine (Shingrix®)

I got another shingles vaccine before 2018. Do I need the new vaccine?
 Yes! It's over 90% effective in preventing shingles.

I had shingles already. Do I still need this shot?

Jim's Story
We've been to multiple emergency room visits, multiple eye specialists... and it's going on four years.

—Jim, shingles survivor.
 See full "A Shingles Story" at ShotByShot.org

English | Spanish



Do you smoke? Have asthma, diabetes, or a weakened immune system?

You may be at high risk for pneumonia—a serious lung infection

Pneumonia can be life-threatening!

- 900,000 Americans get pneumonia every year.
- Nearly half a million are hospitalized.
- About 1 in 20 dies.

If you are 19 or older with any of these conditions, ask your doctor about getting pneumonia shots (pneumococcal [NEW-moe-KOK-al] vaccines).

- ✓ Cigarette smoker
- ✓ Asthma
- ✓ Diabetes
- ✓ Certain cancers or having chemotherapy
- ✓ Heart, kidney, and liver diseases
- ✓ Sickle cell disease
- ✓ Cerebrospinal fluid leaks
- ✓ A cochlear implant
- ✓ HIV/AIDS
- ✓ A bone marrow or organ transplant

Get your pneumonia shots.
 They might save your life.
 Learn more at cdc.gov or call 1-800-CDC-INFO.
 If you smoke, call 1-800-NO-BUTTS

English | Spanish

VFA Poster now available for download in the following languages!

Arabic | Armenian | Cambodian

Chinese (Simplified) | Farsi | Hindi | Hmong | Japanese | Korean | Lao

Portuguese | Punjabi | Russian | Tagalog | Thai | Vietnamese



THANK YOU!

Questions?

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