THE BASICS
Highlighting general vaccine administration guidelines

AND BEYOND
Sharing vaccination strategies

GET STARTED

- This resource is not meant to be comprehensive.
- For more information, consult the professional standards for medication administration; full product Prescribing Information; and guidelines from the Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and your state health department or agency.

Provided as an educational resource by Merck
# THE BASICS: VACCINATION GUIDELINES

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VACCINATION BEST PRACTICES

THE BASICS
Highlighting general vaccine administration guidelines

START SECTION
Every office ideally should designate a vaccine coordinator, someone whose role is to coordinate the processes involved in vaccine supply, storage, and handling.¹

- The coordinator—such as a physician, nurse, or office manager—is responsible for items such as:¹
  - Ordering and maintaining a vaccine inventory (e.g., keeping track of expiration dates) with necessary supplies
  - Overseeing proper receipt and storage of vaccine deliveries
  - Monitoring storage units and record keeping

- In addition, at least one other person in the office should be aware of these processes to serve as backup and support to the vaccine coordinator¹

Visit the Centers for Disease Control and Prevention (CDC) website (www.cdc.gov) for checklists to start a vaccination program in your practice.
Assign a Vaccination Champion For Your Practice

- A vaccination champion can serve as an advocate of vaccinations in your practice and can be filled by any clinical staff.
- Cross-train staff and appoint a different person to fill in and complete these duties in case the vaccination champion is unavailable.
- A vaccination champion is responsible for the following:
  - Unloading, stocking, and monitoring vaccines
  - Managing vaccine inventory
  - Ordering vaccines
  - Implementing office-wide strategies to increase vaccination coverage
Vaccines must be kept at the proper temperature at all times—this is called “maintaining the cold chain.”³

Vaccine storage units must be carefully selected and properly used. Refrigerators and freezers are available in different grades (household and purpose-built/pharmaceutical grade) and types (stand-alone, combination).³

- For vaccine storage, the CDC recommends purpose-built/pharmaceutical grade. These are self-contained units that only refrigerate or freeze and are suitable for vaccine storage.³

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information.³

Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions. CDC, Centers for Disease Control and Prevention.
CDC Recommendations: Refrigerated Vaccines

- Vaccines that require storage temperatures between +36°F and +46°F (+2°C and +8°C) should be stored in a refrigerator unit.  
  
- In a situation where a purpose-built/pharmaceutical-grade refrigerator is not available, a household-grade unit for refrigerated vaccines only may be acceptable.

CDC Recommendations: Frozen Vaccines

- Frozen vaccines should not be stored in the freezer compartment of a combination unit.

- A separate stand-alone freezer should be used to store frozen vaccines that require storage temperatures between -58°F and +5°F (-50°C and -15°C). Defrost manual-defrost freezers when the frost exceeds either 1 cm or per the manufacturer’s suggested limit. While defrosting, store vaccines temporarily in another unit with appropriate freezer temperatures.

The CDC does not recommend the storage of any vaccine in a dormitory-style (or bar-style) combined refrigerator/freezer unit under any circumstances.
VACCINE STORAGE EQUIPMENT

Correct Position of Vaccines in Storage Equipment

- Place vaccines in the central area of the storage space and keep them in their original packaging inside separate containers that are positioned 2 to 3 inches away from storage unit walls, ceiling, floor, and door.³

- Food and beverages should not be stored in a vaccine storage unit.³

Refrigerator Units

- Place vaccines away from the walls, floors, and vents in the part of the unit best able to maintain the required temperature between +36°F and +46°F (+2°C and +8°C).³

- Do not store vaccines in the deli, fruit, and vegetable drawers, or in the door of the unit. If other biologics are stored in the unit, vaccines should be stored on the shelf above them.³

Freezer Units

- Store vaccines away from the walls and vents in the part of the freezer best able to maintain the required temperature range between -58°F and +5°F (-50°C and -15°C).³

- Never store vaccines in the freezer door.¹,³

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information.³

Check the full Prescribing Information on the vaccine manufacturer's website for specific storage temperature instructions.
VACCINE STORAGE EQUIPMENT

Monitor the Temperature of Vaccine Storage Units

- To ensure that refrigerators and freezers are maintaining the appropriate temperatures for vaccine storage, make sure each unit has a temperature monitoring device (TMD).
- Check and record minimum and maximum temperatures at the start of each workday. Alternatively, check and record the current temperature at the start and end of each workday.
- If a reading is missed, leave a blank entry in the log.
- Keep the temperature data in a safe, retrievable place for at least 3 years or longer, if required by your state.
- If a temperature is outside the recommended range (temperature excursion), notify the vaccine coordinator or supervisor without delay. Also, notify staff by labeling exposed vaccines as “DO NOT USE” and placing them in a separate container apart from other vaccines (do not discard these vaccines).

Visit the Clinic Tools at www.immunize.org for Vaccine Temperature Logs

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information. Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions. CDC, Centers for Disease Control and Prevention.
VACCINE STORAGE EQUIPMENT

Use CDC-Recommended Temperature Monitoring Devices

- The CDC recommends a specific type of temperature-monitoring device called a “digital data logger” with the following characteristics:
  - Logging interval (or reading rate) that can be programmed by the user to measure and record temperatures no less frequently than every 30 minutes
  - Detachable probe that best reflects vaccine temperatures (e.g., a probe buffered with glycol, glass beads, sand, or Teflon®)
  - Includes an alarm for out-of-range temperatures
  - Capable of showing the current temperature, as well as minimum and maximum temperatures
  - Within +/-1°F accuracy (+/-0.5°C)
  - Have a low-battery indicator

Brands mentioned are trademarks of their respective owners.

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information. Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions. CDC, Centers for Disease Control and Prevention.

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VACCINE STORAGE EQUIPMENT

Take Precautions to Protect Vaccine Storage Units’ Power Supplies

- Use a safety-lock plug or an outlet cover to reduce the chance of a unit becoming inadvertently unplugged.\(^3\)
- Avoid using power outlets that can be activated by a wall switch, built-in circuit switches (which may have reset buttons), or power strips, as these can be tripped or switched off inadvertently.\(^3\)
- Post a warning sign near the plug and on the refrigerator and freezer units alerting staff, janitors, etc. not to unplug the units.\(^3\)
- Consider a back-up generator that automatically provides power to the storage units to maintain the recommended storage temperatures in the event of power outages.\(^3\)
- Ensure that the alarm to alert staff of temperature excursions works properly.\(^1\)

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information.\(^3\) Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions.
Ensure Proper Vaccine Storage Conditions

- Take preventive action to avoid improper vaccine storage conditions, including inappropriate exposure to light for some vaccines and exposure to storage temperatures outside the recommended ranges.

- Each facility should have a detailed written Emergency Vaccine Storage and Handling Plan in the event of refrigerator and/or freezer malfunctions, power failures, natural disasters, or other emergencies that might compromise appropriate vaccine storage conditions.

- Ensure staff members who administer or handle vaccines are familiar with these plans. Make the plans easily accessible to staff and keep them near the vaccine storage unit(s).

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information. Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions.
VACCINE STORAGE EQUIPMENT

Properly Store Vaccines After Arrival

When vaccines arrive at the practice, enter the relevant information in a “Vaccine Stock Record and Tally Sheet” (available in the Vaccine Storage & Handling Toolkit at www.cdc.gov/vaccines/hcp/admin/storage/toolkit/index.html). Consult the manufacturer’s full Prescribing Information for appropriate storage and handling instructions for any vaccines you receive.¹,³

General storage tips for selected vaccines that require REFRIGERATION at +36°F to +46°F (+2°C to +8°C)³

Vaccines that require temperature maintenance at +36°F to +46°F (+2°C to +8°C) should have the correct temperature range maintained at all times.

Store vaccines immediately at +36°F to +46°F (+2°C to +8°C); storage above or below the recommended temperature range may reduce potency.

General storage tips for selected vaccines that require FREEZING at -58°F to +5°F (-50°C to -15°C)¹,³

Make sure vaccines that need to be kept frozen are maintained between -58°F and +5°F (-50°C and -15°C); storage above or below the recommended temperature may reduce potency.

This section provides guidance on vaccine storage and equipment per the CDC. Individual projects and state/local health department immunization programs may have specific requirements for providers who receive Vaccines for Children (VFC) vaccines or other vaccines purchased with public funds. Consult your immunization program for more information.³

Check the full Prescribing Information on the vaccine manufacturer’s website for specific storage temperature instructions.
VACCINE INVENTORY MANAGEMENT

Maintain Proper Vaccine Inventory Management

Vaccine Inventory Accounting

- Update vaccine stock records at least once a month and before placing orders
- Tally sheets can help keep stock records up-to-date

Vaccine Ordering

- Order and stock only enough vaccine to meet patient needs

Stock Rotation and Removal

- Rotate stock so that the vaccine with the earliest expiration date is always used first
- Immediately remove expired vaccines and diluents

Vaccine Disposal

- Expired or compromised vaccine may potentially be returned for credit, even if they must be discarded; check with the vaccine manufacturer for their return policy
- Empty vaccine vials are generally not considered hazardous or pharmaceutical waste and do not require disposal in a biomedical waste container
- Check and comply with your state’s requirements regarding disposal of open and broken vials and syringes, manufacturer-filled syringes that have been activated, and vaccine predrawn by providers, as medical waste disposal requirements may vary from state to state
Correctly Unpack Vaccine Deliveries

- Because vaccines must be stored properly as soon as they are delivered, arrange for vaccine deliveries only when the vaccine coordinator or back-up person is available.¹

- When a shipment arrives, open immediately and inspect for damage.¹

- Packages may come with temperature indicators; check them to make sure the vaccine has not been exposed to improper temperatures. Examine the shipping container and its contents for any evidence of damage during transport. Maintain the cold chain; if it seems like the product has been exposed to too-low or too-high temperatures, or if anything else seems amiss, store the vaccine in a specially marked tray in the refrigerator or freezer, depending on the type of vaccine, and call the source of the shipment (eg, manufacturer, distributor) immediately for advice.¹

- As soon as a vaccine shipment arrives, enter the relevant information in a “Vaccine Stock Record” (available in the Vaccine Storage & Handling Toolkit at http://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/index.html).¹,³
CHECKLIST FOR PROPER VACCINE HANDLING AND STORAGE

Routine Storage and Handling Checklist

- Includes protocols for all aspects of vaccine inventory management, from ordering to monitoring storage conditions and disposal.

Emergency Vaccine Storage, Handling, and Transport Checklist

- Includes up-to-date contact information for alternative vaccine storage facility and transportation of vaccines.
- Also contains protocols for all aspects of emergency vaccine management, including monitoring vaccines during a power outage, emergency vaccine transport, assessing whether vaccine can be used after an emergency, and how to access the building and facility after-hours.

For resources, visit www.cdc.gov for the CDC Vaccine Storage & Handling Toolkit and www.immunize.org for the Vaccine Storage & Handling Clinic Tools.
Train and Educate Staff

- All personnel who will administer vaccines should receive competency-based training and education on vaccine administration before providing vaccines to patients.

- Providers can orient new staff to vaccines used in their office and validate the staff’s knowledge and skills about vaccine administration with a skills checklist. An example of a skills checklist can be found at https://www.immunize.org/catg.d/p7010.pdf.

- Providers should include training to temporary personnel who may be filling in on days when the clinic is short staffed or helping during peak times.

- Competency-based training should be integrated into existing staff education programs such as new staff orientation and annual education requirements.

- Provide continuing education for all staff on the use and administration of new vaccines, new schedules, and new or revised recommendations.
Review Vaccination Schedules

- Since timing and spacing of vaccine doses are two of the most important issues in the appropriate use of vaccines, providers should follow the currently recommended vaccination schedules that cover children, adolescents, and adults.4
- Administer all appropriate vaccines during the same visit.4
- The most current schedules can be viewed and downloaded at www.cdc.gov/vaccines/index.html, the CDC’s National Immunization Program website.5,6

CDC, Centers for Disease Control and Prevention.

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Review Manufacturers’ Guidelines for Individual Vaccines

- Professional standards for medication administration, manufacturer instructions, and organizational policies and procedures should always be followed when applicable. Consult ACIP and CDC resources or your office vaccine coordinator as needed.
**Screen Patients**

- Screen all patients for contraindications, warnings, and precautions every time a vaccine is administered, even if the patient has previously received a dose of that vaccine.
  - The patient’s status can change from one visit to the next, or a new contraindication or precaution may have been added.
  - Thorough screening for contraindications and precautions prior to vaccination can help prevent reactions.
- Many state immunization programs and other organizations have developed standardized screening tools. Consult your state’s immunization program for more information or visit [www.cdc.gov](http://www.cdc.gov).
- Screening checklists for Adult and Child Vaccination are available within the Clinic Tools at [www.immunize.org](http://www.immunize.org).
Educate Patients

• Health care providers should anticipate questions that parents or patients may have regarding the need for, or safety of, vaccination.\textsuperscript{4}

• Health care providers should have a basic understanding of how patients view vaccine risk.\textsuperscript{4}

• Developing effective ways to address vaccine safety concerns when they arise is imperative for vaccination providers.\textsuperscript{4}
  – This can be accomplished by assessing patients’ specific concerns and information needs, providing them with accurate information, and referring them to credible sources for more information.\textsuperscript{4}

• Patient education materials can encourage patients to receive recommended vaccinations. Patient education tools can be obtained online from the CDC at \url{www.cdc.gov}.\textsuperscript{4}

• It is important to document when the patient or parent/guardian refuses vaccines, as well as document that there was a provider-patient/parent conversation about the risks of refusing to vaccinate.\textsuperscript{7,8}

Visit \url{www.cdc.gov} for patient education tools on vaccination.
Provide Vaccine Information Statement Sheets

- It is a federal requirement to give patients a copy of the relevant federal VIS for certain vaccines they are about to receive. It is recommended to provide a VIS whether a vaccine is covered by the law or not. If the patient is a minor, the VIS must be given to the parent or legal representative.

What Are Vaccine Information Statements?

- VISs are developed by the staff of the CDC and undergo intense scrutiny by panels of experts for accuracy. Each VIS provides information to properly inform the adult vaccinee or the minor child’s parent or legal representative about the risks and benefits of each vaccine. The VISs are not meant to replace interactions with health care providers who should answer questions and address concerns that the vaccinee or the parent/guardian may have.

Visit [www.cdc.gov/vaccines/hcp/vis/](http://www.cdc.gov/vaccines/hcp/vis/) to obtain a complete set of current VISs.

CDC, Centers for Disease Control and Prevention; VIS, Vaccine Information Statement.
BEFORE VACCINATING

Where to Obtain Vaccine Information Statements

1. **The Internet.** All current VISs are available at:
   - The CDC website: [www.cdc.gov/vaccines/hcp/vis/](http://www.cdc.gov/vaccines/hcp/vis/)
     VISs from this site can be downloaded as pdf files and printed. These files are compatible with screen-reader devices for use by the vision-impaired.
   - The Immunization Action Coalition website: [www.immunize.org/vis](http://www.immunize.org/vis)

2. **Your State Health Department.** PDF versions of VISs can be ordered from your local health department and are suitable for reproducing as handouts for patients.

Visit [www.cdc.gov](http://www.cdc.gov) to obtain a complete set of current VISs.

CDC, Centers for Disease Control and Prevention; VIS, Vaccine Information Statement.
WHILE VACCINATING

Before You Start

- Wash hands. Use gloves as appropriate.\textsuperscript{7}

Prepare Vaccines

- Overexposure to heat, cold, or light may reduce vaccine potency.\textsuperscript{3}
- Inspect the vial for damage or contamination and check the expiration date.\textsuperscript{7}
- Some vaccines can be drawn from the vial and injected as is; others must be reconstituted (mixed with a diluent) before use.\textsuperscript{7}
- Agitate the vial (per manufacturer’s recommendation) to mix the vaccine thoroughly and obtain a uniform suspension prior to withdrawing each dose.\textsuperscript{7}
- Inspect vaccines visually for particulate matter and/or discoloration prior to administration. If these are noted or the vaccine cannot be resuspended, the vaccine should not be administered.\textsuperscript{7}

Refer to the Prescribing Information on the vaccine manufacturer’s website for specific vaccine preparation instructions.
WHILE VACCINATING

Key Steps in Preparing Vaccines

For Single-Dose Vials:
- Prepare vaccine just prior to administration.
- Remove the vaccine vial cap and wipe the rubber stopper with an alcohol pad.

For Manufacturer-Filled Syringes:
- Once a manufacturer-filled syringe is activated (ie, needle attached or needle cover removed), use it or discard it at the end of the workday.\(^7\)

For handling instructions for specific vaccines, always refer to the supplied manufacturer’s guidelines.\(^1\)
WHILE VACCINATING

Key Steps in Preparing a Vaccine That Requires Reconstitution

- First, wipe the rubber stoppers of the vials with an alcohol swab.\(^7\)
- Only use diluent supplied by the manufacturer.\(^7\)
- Ensure that the expiration date of the vials has not passed. Expired vaccine or diluent should never be used.\(^7\)
- Inject diluent into the vial of vaccine and agitate the vial for thorough mixing (follow the specific instructions provided in the product information).\(^7\)
  - Each diluent is specific to the corresponding vaccine in volume, sterility, pH, and chemical balance.\(^7\)
- Visually inspect the contents of the vial for particulate matter or discoloration. If the appearance does not match the description of the reconstituted vaccine, or the vaccine will not dissolve, discard.\(^7\)

For vaccines requiring reconstitution, the vaccine must be either administered within the time guidelines specified in the manufacturer’s product information or discarded.\(^7\)

For handling instructions for specific vaccines, always refer to the supplied manufacturer’s guidelines.\(^1\)
WHILE VACCINATING

Help Prevent Administration Errors

Here are some tips that can be implemented to help prevent administration errors in your practice:

• Examine the shipping container and its contents for any evidence of damage.\(^1\)

• Store vaccines at the proper temperature immediately upon arrival.\(^1\)

• Check the expiration date on the vaccine prior to use. Any expired vaccines and diluents should be removed immediately to avoid inadvertently administering them.\(^1\)

• Refer to the manufacturers’ guidelines for reconstitution and the proper site and mode for injection.\(^7\)

• Provide patients with current VISs and educational materials.\(^7\)

VIS, Vaccine Information Statement.
AFTER VACCINATING

1. After injection, remove the needle and apply an adhesive bandage to the injection site if there is any bleeding.7

2. Do NOT recap the used needle.7

3. Dispose of the used needle in appropriate sharps disposal container. Follow proper medical waste disposal guidelines.7

CDC Guidelines on Accidental Needlesticks12
If you are stuck by a needle or get a patient’s blood in your eyes, nose, mouth, or on broken skin:

1. Immediately wash needlesticks and cuts with soap and water.

2. Flush splashes of water to the nose, mouth, or skin.

3. Irrigate your eyes with clean water, saline, or sterile irrigants.

4. Report the exposure to your employer and the department responsible for managing exposure (eg, occupational health department, infection control department).
   - Prompt reporting is important, as post-exposure treatment may be recommended in some cases and may need to be started as soon as possible.

For more information, visit [www.cdc.gov/HAI/pdfs/bbp/Exp_to_Blood.pdf](http://www.cdc.gov/HAI/pdfs/bbp/Exp_to_Blood.pdf)
Monitor patient for any signs of an adverse reaction

- Report any adverse event that the patient experiences following the vaccination and that becomes known to you, whether you think the vaccine caused the event or not.4
- Report the adverse reaction to the Vaccine Adverse Event Reporting System (VAERS).4
- Be prepared to treat adverse reactions in accordance with your practice protocols.4

Visit [www.vaers.hhs.gov](http://www.vaers.hhs.gov) to download VAERS forms and for more information.
AFTER VACCINATING

Keep Patient Vaccination Records—For the Clinic/Office

- Fully document all vaccines administered in the patient’s permanent medical record.\(^7\)

**Documentation includes\(^7\):**

1. Date of administration
2. Vaccine manufacturer
3. Vaccine lot number
4. Site of vaccination
5. Name and title of the person who administered the vaccine and the address of the clinic or facility where the permanent record will reside
6. Vaccine Information Statement (VIS), if applicable
   - Date printed on the VIS
   - Date VIS given to patient or parent/guardian

- Providers should update the patients’ permanent medical records to reflect any documented episodes of adverse events.\(^7\)
- The CDC recommends that a refusal to receive certain vaccines also be documented in the patient’s record.\(^7\)

CDC, Centers for Disease Control and Prevention.

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AFTER VACCINATING

**Keep Patient Vaccination Records—For the Patient**

- Provide patients with a personal vaccination record that includes the vaccination(s) and the date administered.\(^7\)
VACCINATION BEST PRACTICES

AND BEYOND

Sharing vaccination strategies

START SECTION
STRATEGIES FOR ALL PATIENTS

Provide Counseling\textsuperscript{14,15}

- A recommendation from an HCP for a vaccination is a strong predictor of childhood, adolescent, and adult vaccination.
- Discuss any concerns about vaccination, either with the child’s parents or with the patient.
- For childhood vaccination, provide parents with information about upcoming vaccinations before a child’s scheduled visit.

Maximize Opportunities for Vaccinations\textsuperscript{14-16}

- Use any appropriate patient encounter as an opportunity to discuss vaccinations.
  - For children and adolescents, this includes sick visits, weight checks, and school and sports physicals.
- Implement standing orders for vaccinations when appropriate.

HCP, health care professional.
STRATEGIES FOR ALL PATIENTS

Improve Vaccine Accessibility\textsuperscript{14,15}

- For adult patients:
  - Services such as walk-in clinics and alternate venues for vaccinations have been shown to provide high quality of care, reach new patients, and contain costs.
  - Retail pharmacy-based vaccination programs improve access by providing vaccines during times when physician offices are typically closed.

- For children and adolescent patients:
  - Check status and administer vaccinations at same-day or walk-in appointments.

Maintain Electronic Medical Records\textsuperscript{14,15}

- Use EMR systems to prompt providers to determine patients’ vaccination needs and recommend appropriate vaccinations.
- Use EMR systems to identify patients who are not up-to-date with their vaccinations and send a notice to these patients to schedule an appointment for vaccinations.

EMR, electronic medical record.
HEALTHY PEOPLE 2030

Healthy People 2030 Overview

- Healthy People 2030 sets data-driven national objectives to improve health and well-being over the next decade.\(^\text{17}\)

- Includes 355 core objectives across several topics, including vaccination.\(^\text{17,18}\)
  - The ultimate goal for the vaccination core objective is to increase vaccination rates.\(^\text{18}\)
HEALTHY PEOPLE 2030

Selected Vaccination Core Objectives for ...

**Children and Adolescents**
Reduce the proportion of children who receive 0 doses of recommended vaccines by age 2 years¹⁹

- Baseline: 1.3% (2015)
- Target: 1.3%

**All Individuals**
Increase the proportion of persons aged ≥6 months who are vaccinated annually against seasonal influenza²⁰

- Baseline: 49.2% (2017-2018)
- Target: 70.0%

To review additional vaccination core objectives, please visit [https://health.gov/healthypeople/objectives-and-data/browse-objectives/vaccination](https://health.gov/healthypeople/objectives-and-data/browse-objectives/vaccination).
VACCINE HESITANCY

Countering Parental Vaccine Hesitancy

- Strongly support the benefits of vaccination.
- Use a presumptive approach when recommending vaccines.
- Address parental questions about vaccines.
- Acknowledge concerns and correct misconceptions.
PRESumptive APPROACH

Understanding the Presumptive Approach to Vaccination Recommendations

- The way a vaccination recommendation is presented makes a difference.
  - When providers use a presumptive approach (one that assumes parents will choose to vaccinate), parents are more likely to accept vaccines than when a participatory (one that presents parents with a decision to make) is used.
  - A participatory approach might sound like, “Have you thought about the vaccines your child needs today?”

- To use the presumptive approach in practice try, “Your child needs the flu vaccine today.”
VACCINES FOR CHILDREN PROGRAM

The CDC’s Vaccines for Children Program\(^{23}\)

- VFC is a federally funded program that provides vaccines at no cost to children who might not otherwise be vaccinated because of an inability to pay.

- Vaccines available through the VFC program are those recommended by the ACIP.

- Children are eligible if they are younger than 19 years of age and are one of the following: Medicaid-eligible, uninsured, underinsured, or American Indian or Alaska Native.

ACIP, Advisory Committee on Immunization Practices; CDC, Centers for Disease Control and Prevention; VFC, Vaccines for Children.
STANDARDS FOR ADULT PRACTICE

National Vaccine Advisory Committee Practice Standards for All HCPs\(^{24}\)

- Assess vaccination status of all your patients at every clinical encounter.
- Strongly recommend appropriate vaccines that patients need.
- Administer or refer your appropriate patients to a vaccination provider.
- Document vaccinations received by your patients.

Vaccine Needs Assessment\(^{25}\)

Vaccine Recommendation\(^{26}\)

Vaccine Administration and Referral\(^{27}\)

Vaccine Documentation\(^{28}\)
STANDARDS FOR ADULT PRACTICE

National Vaccine Advisory Committee Practice Standards for All HCPs

• Assess vaccination status of all your patients at every clinical encounter.
• Strongly recommend appropriate vaccines that patients need.
• Administer or refer your appropriate patients to a vaccination provider.
• Document vaccinations received by your patients.

- Stay informed on latest CDC recommendations for adult vaccination.
- Implement protocols and policies, such as standing orders, vaccine questionnaires, and patient reminders to support vaccine assessment of patients.

Vaccine Needs Assessment

Vaccine Recommendation

Vaccine Administration and Referral

Vaccine Documentation
STANDARDS FOR ADULT PRACTICE

National Vaccine Advisory Committee Practice Standards for All HCPs24

- Assess vaccination status of all your patients at every clinical encounter.
- Strongly recommend appropriate vaccines that patients need.
- Administer or refer your appropriate patients to a vaccination provider.
- Document vaccinations received by your patients.

- Share the tailored reasons why the recommended vaccine is right for the patient.
- Address patient questions and concerns about the vaccine.
- Remind patients that vaccines help protect them and their loved ones from many diseases.
- Explain the potential costs of getting the disease.
STANDARDS FOR ADULT PRACTICE

National Vaccine Advisory Committee Practice Standards for All HCPs

• Assess vaccination status of all your patients at every clinical encounter.
• Strongly recommend appropriate vaccines that patients need.
• Administer or refer your appropriate patients to a vaccination provider.
• Document vaccinations received by your patients.

Vaccine Needs Assessment

• Offer the vaccines you stock or refer patients to providers in the area that offer vaccines you don’t stock.
• Recommend and offer vaccines at the same visit.
• Use standing orders or protocols for vaccine administration.
• For vaccines you don’t stock, refer patients to a local vaccination provider who can vaccinate.

Vaccine Recommendation

Vaccine Administration and Referral

Vaccine Documentation
STANDARDS FOR ADULT PRACTICE

National Vaccine Advisory Committee Practice Standards for All HCPs

- Assess vaccination status of all your patients at every clinical encounter.
- Strongly recommend appropriate vaccines that patients need.
- Administer or refer your appropriate patients to a vaccination provider.
- Document vaccinations received by your patients.

- Record vaccinations in patients’ medical records.
- Participate in your state’s immunization registry.
- Follow up and confirm that patients received recommended vaccines that you referred them to get.

Vaccine Needs Assessment

Vaccine Recommendation

Vaccine Administration and Referral

Vaccine Documentation
REFERENCES


REFERENCES


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