

Make Sure Your Patients Are Protected from Meningococcal Disease Caused by Serogroups A, C, W, or Y

Meningococcal Vaccine Recommendations by Age and Risk Factor for Serogroups A, C, W, or Y Protection

A separate vaccine is needed for protection against meningococcal serogroup B disease.

MenACWY = Menactra (sanofi) and Menveo (Novartis)
 MenACWY-D = Menactra Hib-MenCY = MenHibrix (GlaxoSmithKline)
 MenACWY-CRM = Menveo MPSV = Menomune (sanofi)

Routine Recommendations for Quadrivalent Meningococcal Conjugate Vaccine (MenACWY)

For preteens age 11 through 12 years	Give dose #1 of 2-dose MenACWY series. ¹ (Dose #2 will be due at age 16 years.)
For teens age 13 through 15 years	Give catch-up dose #1 of 2-dose MenACWY series. (Dose #2 will be due at age 16 years.)
For teens age 16 through 18 years	Give dose #2 of MenACWY. Separate from dose #1 by at least 8 weeks.
Catch-up for teens age 16 through 18 years	If no history of prior vaccination with MenACWY, give 1 dose of MenACWY.
For first year college students, age 19 through 21 years, living in residence halls	If no history of prior vaccination with MenACWY, give 1 dose of MenACWY. ¹ If history of 1 dose of MenACWY given when younger than age 16 years, give dose #2 of MenACWY. ²

Risk-based Recommendations for Persons with Underlying Medical Conditions or Other Risk Factors

TARGETED GROUP BY AGE AND/OR RISK FACTOR	PRIMARY DOSE(S)	BOOSTER DOSE(S)
Travelers to or residents of countries where meningococcal disease is hyperendemic or epidemic,³ people present during outbreaks caused by a vaccine serogroup,⁴ and other people with prolonged increased risk for exposure (e.g., microbiologists routinely working with <i>Neisseria meningitidis</i>)		
For children age 2 through 18 months	Give MenACWY-CRM at ages 2, 4, 6 and 12–15 months. ⁵	
For children age 7 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses, separated by 3 months, ⁶ of MenACWY-CRM (if age 7–23 months) ⁷ or MenACWY-D (if age 9–23 months).	
For age 2 through 55 years	Give 1 dose of MenACWY. ¹	
For age 56 years and older	If no previous MenACWY dose and either short-term travel or outbreak-related, give 1 dose of MPSV; all others, give 1 dose of MenACWY.	
People with persistent complement component deficiencies¹⁰		
For age 2 through 18 months	Give MenACWY-CRM or Hib-MenCY at ages 2, 4, 6 and 12–15 months	
For children age 7 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses, separated by 3 months, of MenACWY-CRM (if age 7–23 months) ⁷ or MenACWY-D (if age 9–23 months).	
For ages 2 through 55 years	Give 2 doses of MenACWY, 2 months apart.	
For age 56 years and older	Give 2 doses of MenACWY, 2 months apart.	
People with functional or anatomic asplenia, including sickle cell disease		
For children age 2 through 18 months	Give MenACWY-CRM or Hib-MenCY at ages 2, 4, 6 and 12–15 months.	
For children age 19 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses of MenACWY-CRM, 3 months apart.	
For children age 2 through 55 years	Give 2 doses of MenACWY, 2 months apart. ¹²	
For age 56 years and older	Give 2 doses of MenACWY, 2 months apart.	

FOOTNOTES

- If the person is HIV-positive, give 2 doses, 2 months apart.
- The minimum interval between doses of MenACWY is 8 weeks.
- Prior receipt of Hib-MenCY is not sufficient for children traveling to the Hajj or African meningitis belt as it doesn't provide protection against serogroups A or W.
- Seek advice of local public health authorities to determine if vaccination is recommended.
- Children ages 2 through 18 months who are present during outbreaks caused by serogroups C or Y may be given an age-appropriate series of Hib-MenCY.
- If a child age 7 through 23 months will enter an endemic area in less than 3 months, give doses as close as 2 months apart.
- If using MenACWY-CRM, dose 2 should be given no younger than age 12 months.
- If primary dose(s) given when younger than 3 years, followed by boosters every 5 years.
- Booster doses are recommended if the person received a 1-dose primary then boost every 5 years.
- Children with functional or anatomic series of PCV13 vaccine before vaccination at least 4 weeks following last dose may be given at any time before or after.

Technical content reviewed by the Centers for Disease Control and Prevention.

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◀ This one-page chart describes which MenACWY vaccine is needed by age group or risk factor.

www.immunize.org/catg.d/p2018.pdf

Standing orders for other vaccines are available at www.immunize.org/standing-orders. NOTE: This standing orders template may be adapted per a practice's discretion without obtaining permission from IAC. As a courtesy, please acknowledge IAC as its source.

STANDING ORDERS FOR Administering Meningococcal ACWY Vaccine to Children and Teens

Purpose

To reduce morbidity and mortality from meningococcal disease caused by serotypes A, C, W, or Y by vaccinating all children and teens who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices.

Policy

Where allowed by state law, standing orders enable eligible nurses and other healthcare professionals (e.g., pharmacists) to assess the need for and vaccinate children and teens who meet any of the criteria below.

Procedure

1 Assess children and teens for need of vaccination against meningococcal disease according to the following criteria:

Routine meningococcal ACWY vaccination

- Age 11–12 years and not previously vaccinated
- As catch-up for ages 13–15 years and not previously vaccinated
- Age 16 through 18 years and in need of dose #2
- As catch-up for unvaccinated teens ages 16 through 18 years
- First-year college students age 19 through 21 years living in a residence hall who were never vaccinated or who were last vaccinated when younger than age 16 years

Risk-based meningococcal ACWY vaccination

- Age 2 months and older with diagnosis of persistent complement component deficiency (an immune system disorder) or diagnosis of anatomic or functional asplenia (including sickle-cell disease); children who are part of an outbreak attributable to a vaccine serogroup; or anticipated travel to a country where meningococcal disease is hyperendemic or epidemic (e.g., the "meningitis belt" of sub-Saharan Africa), particularly if contact with the local population will be prolonged

2 Screen for contraindications and precautions

Contraindications: a history of a serious allergic reaction (e.g., anaphylaxis) after a previous dose of meningococcal vaccine or to a meningococcal vaccine component. For information on vaccine components, refer to the manufacturer's package insert (www.immunize.org/packageinserts) or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/exipient-table-2.pdf.

Precaution: moderate or severe acute illness with or without fever

3 Provide Vaccine Information Statements

Provide all patients (or, in the case of a minor, their parent or legal representative) with a copy of the most current federal Vaccine Information Statement (VIS) available at www.immunize.org/vis. You must document in the patient's medical record or office log, the publication date of the VIS and the date it was given to the patient (parent/legal representative). Provide non-English speaking patients with a copy of the VIS in their native language, if one is available and desired; these can be found at www.immunize.org/vis.

4 Prepare to Administer Vaccine

Choose the needle gauge, needle length, and injection site according to the following chart:

AGE OF PATIENT	NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
Adolescents (age 11–21 years)	22–25	5/8"–1"	Deltoid muscle of arm
Children (age 3–10 years)	22–25	5/8"–1"	Deltoid muscle of arm
Toddlers (age 1–2 years)	22–25	1–1¼"	Anterolateral thigh muscle
Infants (age 2–12 months)	22–25	1"	Anterolateral thigh muscle

* A 5/8" needle may be used in patients weighing less than 130 lbs (<60 kg) for IM injection in the deltoid muscle only if the skin is stretched tight, the subcutaneous tissue is not bunched, and the injection is made at a 90-degree angle to the skin.

Technical content reviewed by the Centers for Disease Control and Prevention.

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www.immunize.org/catg.d/p3081a.pdf • Item #P3081a (7/15)

Use this MenACWY standing orders template for children and teens to streamline vaccination in your practice setting.

www.immunize.org/catg.d/p3081a.pdf