

# FREE Laminated Vaccine Pocket Guides Now Available from IAC – Order Online

- ▶ Available in bulk quantities for pneumococcal and zoster vaccines
- ▶ A valuable aid for every staff member who provides vaccination services

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[www.immunize.org/pocketguides](http://www.immunize.org/pocketguides)

Laminated, pocket-sized (3 3/4 x 6 3/4") cards providing quick reference information highlighting:

- Indications and contraindications for each vaccine
- Targeted populations to be vaccinated
- Technical details for vaccine administration
- Talking points for conversations with patients

### Pneumococcal Vaccine Pocket Guide

**Routine Vaccination with PCV13 and PPSV**

**Children:** Administer pneumococcal conjugate vaccine (PCV13) to all infants and children at ages 2, 4, and 6 mos with a booster at age 12–15 mos. For incomplete or unvaccinated children, catch-up vaccination should occur through age 59 mos.

**Adults age 65 years (or older):**

- Administer a 1-time dose of PCV13 (if not previously received).
- Administer a dose of pneumococcal polysaccharide vaccine (PPSV) at least 1 yr after PCV13.

**Risk-Based Vaccination with PCV13 and PPSV**

A dose of PPSV is recommended for all people age 2 through 64 yrs with any of the following conditions:

- Cigarette smokers age 19 yrs and older
- Chronic cardiovascular disease (e.g., congestive heart failure, cardiomyopathy)
- Chronic pulmonary disease (including asthma in people age 19 yrs and older)
- Diabetes mellitus, alcoholism, or chronic liver disease
- Candidate for or recipient of cochlear implant
- Cerebrospinal fluid leak
- Functional or anatomic asplenia (e.g., sickle cell disease, splenectomy)
- Immunocompromising conditions (e.g., congenital or acquired immunodeficiency, HIV infection, leukemia, lymphoma, Hodgkin disease, generalized malignancy, iatrogenic immunosuppression, multiple myeloma, or on immunosuppressive therapy, including long-term systemic corticosteroids, radiation therapy)
- Solid organ transplantation; for bone marrow transplantation patients, see [www.cdc.gov/vaccines/pubs/hemato-cell-transplts.htm](http://www.cdc.gov/vaccines/pubs/hemato-cell-transplts.htm)
- Chronic renal failure or nephrotic syndrome

A second dose of PPSV is recommended for children and adults through age 64 yrs who are at highest risk of serious pneumococcal disease or likely to have a rapid decline in pneumococcal antibody levels (categories g–j above) at least 5 yrs after dose #1.

**Note: Administer an additional dose of PPSV** to all adults at age 65 yrs (or older). Give it at least 5 yrs after any previous PPSV.

A 1-time dose of PCV13 is recommended for previously unvaccinated people age 6 through 64 yrs who meet any of the criteria in categories e–j above.

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• Both pneumococcal vaccines are covered under Medicare Part B for people 65 yrs and older when given at least 1 yr apart.

### Herpes Zoster (Shingles) Vaccine Pocket Guide

**Who Should Be Vaccinated**

A one-time vaccination against herpes zoster (also known as shingles) is routinely recommended for all people age 60 yrs and older who do not have a valid contraindication to the vaccine.

**Points with Patients**

People at risk for developing shingles if they have had an earlier chickenpox. Studies have shown that over 99% of adults age 60 yrs and older have been previously infected with chickenpox, whether or not they recall the episode. Not everyone who has had chickenpox will develop shingles at some time in their lives. People who are vaccinated against it. The older you are, the greater the risk of developing shingles. Shingles usually starts as a blistering rash which can become severe. It can be extremely painful and can cause serious problems, especially if it affects the eye. Other serious problems that may include skin infections, muscle weakness, and loss of hearing. Shingles can also experience long-term nerve pain that can last for months, and can interfere with eating and sleeping, and be debilitating.

**Points for Healthcare Providers**

Shingles is caused by the reactivation of the dormant chickenpox virus in people who have been infected with chickenpox. The zoster vaccine efficacy decreases with age, getting vaccinated significantly reduces the risk of developing post-herpetic neuralgia (PHN). The oldest adults are at the highest risk of PHN, and they are least able to tolerate the condition or the pain used to control pain. The zoster vaccine is routinely recommended for people age 60 and older. It should be covered by most health insurance plans. For people not in Medicare, it is currently available under Part D, the Medicare drug benefit. Encourage patients to purchase the vaccine from their pharmacy and bring it to your office for administration. This "brown bag" approach won't significantly jeopardize the stability of the vaccine.

Immunization Action Coalition ([www.immunize.org](http://www.immunize.org)) Item #R2205 (1/16)  
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**NOTE:** These technical guides are for staff use only and are not suitable for use by patients.