

## STEP 1:

# Getting Started

IF YOU WORK in a setting that serves adults in some way – whether that be an internal medicine, family medicine, or ob-gyn practice, or a pharmacy, family planning clinic, homeless shelter, sexually transmitted disease clinic, correctional setting, or

**You could prevent serious disease, and even death, by offering vaccinations to your patients, clients, or other adult populations.**

drug treatment program – you could prevent serious disease, and even death, by offering vaccinations to your patients, clients, or other adult

populations. Increasingly, providing vaccination services in multiple types of healthcare settings is seen by public health and immunization experts as one of the best ways to deliver vaccines to adults.

In 2004, the Immunization Action Coalition (IAC) first published *Adults Only Vaccination: A Step-by-Step Guide* to help clinicians in a variety of adult healthcare settings implement programs to vaccinate adults against infectious diseases. This 2017 updated edition, *Vaccinating Adults: A Step-by-Step Guide* (“the *Guide*”), has been developed to incorporate current information with the expert advice found in the original publication. But no guide or “how-to” manual is sufficient to train you to be a full-fledged vaccinator. You will need the assistance of one or two well-trained and experienced healthcare professionals who might already be working in your healthcare setting. You also can connect with experienced staff at your state or local health department. A helpful list of state immunization program coordinators is available through IAC’s website at [www.immunize.org/coordinators](http://www.immunize.org/coordinators).



We hope you won’t be intimidated by the seeming complexities of vaccination. While it’s true that the number of vaccines available and their dosing schedules can be a bit daunting, and official recommendations can change frequently, vaccination may be approached on many different levels. In the *Guide*, we address vaccination at its most basic level. As you gain experience, you will learn more about vaccine recommendations and scheduling intricacies.

Print and Internet resources abound to help you keep up to date with scheduling and other practical issues. Some of the great resources available from IAC include:

- **IAC’s website for healthcare professionals at [www.immunize.org](http://www.immunize.org).** Check this site often for the latest information to help you stay current. The Clinic Resources web section at [www.immunize.org/clinic](http://www.immunize.org/clinic) is an excellent place to start.

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

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

### Clinic Resources

#### Helpful Resources for Your Vaccination Clinic

This section is a one-stop source of practical information for immunization providers. You will find “how-to” information about providing vaccinations in a clinic or non-traditional setting.

- Administering Vaccines
- Documenting Vaccination
- Scheduling Vaccines
- Screening for Contraindications
- Storage & Handling
- Vaccine Recommendations

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### ■ Periodic IAC publications

#### ▶ **IAC Express** at [www.immunize.org/express](http://www.immunize.org/express).

This publication, which is delivered directly to your email box every week, features important immunization developments such as the latest vaccine recommendations and licensures, newly released information from the Centers for Disease Control and Prevention (CDC), including new and updated Vaccine Information Statements and practical vaccination education materials like patient handouts or staff materials, practical journal articles, and more. Be sure to subscribe to *IAC Express* at [www.immunize.org/subscribe](http://www.immunize.org/subscribe).



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



[www.immunize.org/technically-speaking](http://www.immunize.org/technically-speaking)

▶ **Technically Speaking**, at [www.immunize.org/technically-speaking](http://www.immunize.org/technically-speaking), is a monthly column written by IAC Executive Director Deborah L. Wexler, MD. The column is featured in The Children's Hospital of Philadelphia Vaccine Education Center's monthly *Vaccine Update for Healthcare Providers*. The content covers practical topics in immunization delivery that are relevant to all patient ages. You'll find guidance about topics such as needle length, vaccine administration technique, cold chain issues, and immunization schedules.

These and other resources will serve you well once you are vaccinating, but they reflect a basic vaccination competence that we don't want to assume here. They tend to start "in the middle of things" because they are directed at established vaccinators. With the *Guide*, we want to start where you might be now – at the beginning.

In this *Guide*, we assume that:

- you don't necessarily have the basic vaccination competencies (although you might);
- you don't necessarily know how vaccination services will fit in with your other clinical or program offerings;
- you have:
  - a community in need of more opportunities to be vaccinated against vaccine-preventable diseases;
  - a motivated staff with at least one part-time or full-time member who can make time to lead the vaccination program, as well as one who can legally (in your state) administer vaccines; and
  - a healthcare setting willing to invest time and effort to contribute to individual and community health through vaccination.

This *Guide* strips essential preventive medicine intervention down to its basic steps. You currently are reading the first of seven steps; subsequent steps cover important "how to" practices such as:

- setting up for vaccination services;
- purchasing vaccines;
- storing and handling vaccine appropriately;
- deciding which people should receive which vaccines;
- administering vaccines; and
- maintaining appropriate records.

**It will all come together – step by step!**

**This Guide strips essential preventive medicine intervention down to its basic steps.**

**Vaccination definitely is one of our most cost-effective medical interventions, generating cost savings through reduced treatments for illness and hospitalizations.**

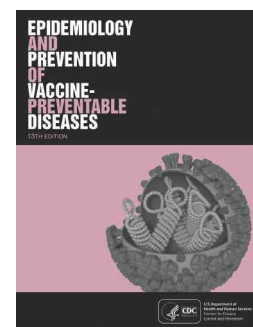
Step 7 of the *Guide* even provides information about the complex topic of billing for vaccines. Offering vaccinations may not be a huge income generator for your organization. But vaccination definitely is one of our most cost-effective medical interventions, generating cost savings through reduced treatments for illness and hospitalizations. In the best-case scenario, if you complete the necessary paperwork



and billing, you will receive appropriate reimbursement for vaccinating adults. Medicare has reimbursed providers for influenza and pneumococcal vaccines for many years. Even so, these vaccines remain woefully underused nationwide, even by Medicare beneficiaries. For adults younger than 65 years, most private insurance companies cover the cost of vaccines recommended by CDC's Advisory Committee on Immunization Practices (ACIP) at no cost to patients. Additionally, many state Medicaid programs cover adult vaccines, and some state immunization programs have special programs to support adult immunization activities.

Need more help? You will want to obtain a copy of CDC's *Epidemiology and Prevention of Vaccine-*

*Preventable Diseases* (known informally as “The Pink Book”). This essential vaccine reference for all vaccinators can be accessed online at [www.cdc.gov/vaccines/pubs/pinkbook/index.html](http://www.cdc.gov/vaccines/pubs/pinkbook/index.html). The entire book or individual chapters may be downloaded for free. Soft-cover editions of the complete book may be purchased (when in stock) through the Public Health Foundation website at <http://bookstore.phf.org/Store/ProductDetails.aspx?productId=27876>.



[www.cdc.gov/vaccines/pubs/pink-book/index.html](http://www.cdc.gov/vaccines/pubs/pink-book/index.html)

### Why the emphasis on adult vaccination?

The simple answer to this question is that adult vaccination needs have suffered from inattention for far too long. It's time to complement our nation's excellent immunization infrastructure for children and teens with a similar immunization landscape for adults.

**In the U.S., fewer adults than children are fully vaccinated even though adults are much more likely to die from vaccine-preventable diseases than are children.**

In the United States, fewer adults than children are fully vaccinated even though adults are much more likely to die from vaccine-preventable diseases than are children. According to the *Recommendations from the National Vaccine Advisory Committee: Standards for Adult Immunization Practice*, available online at

<http://journals.sagepub.com/doi/pdf/10.1177/003335491412900203>, there are many reasons for this “vaccination gap”:



<http://journals.sagepub.com/doi/pdf/10.1177/003335491412900203>

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- Healthcare providers as well as patients may lack knowledge about the need for vaccinating both high-risk and healthy adults. All too often, adults think vaccines are “just for kids.”
- When adults receive care, medical management of acute and chronic illnesses usually receives priority over preventive services. Assessing the patient for recommended vaccines may not even be considered.
- Many adults do not visit a clinician regularly, or they do not have a primary care provider, or they change providers often. As a result, their immunization status simply falls through the cracks. Even patients with chronic medical conditions that place them at high risk for complications from vaccine-preventable diseases often see several different specialists, none of whom takes primary responsibility for immunization, and all of whom can mistakenly assume that vaccination is someone else’s job.
- Some providers do not offer vaccines, or they may not offer all the vaccines recommended for adults.
- Provider payment systems can be complicated, confusing, or inadequate.

**“Adult immunization rates in the United States are embarrassingly low.... We can and must do better.”**

**– L.J TAN, MS, PHD**

Chief Strategy Officer, Immunization Action Coalition

In spite of these challenges, it is critical that we improve our adult immunization levels. As noted by L.J Tan, MS, PhD, chief strategy officer, Immunization Action Coalition, “Adult immunization rates in the United States are embarrassingly low. As a result, thousands of adults will die from vaccine-preventable diseases this year, and hundreds of thousands more will be hospitalized. We can and

must do better.” You and your healthcare setting can make a difference by vaccinating adults.

Indeed, in contrast to adult levels, vaccine coverage levels for children at kindergarten entry exceed 90 percent in almost all places in the United States. Consequently, disease rates for almost all childhood vaccine-preventable diseases have decreased by 95 to 100 percent. This includes rates for pneumococcal disease, for which the childhood vaccine has been available since 2002. That is dramatic progress in improving children’s health. We want to



have the same effective results for adults.

It’s clear we have our work cut out for us. CDC’s 2015 adult immunization coverage estimates (released in 2017) indicate less than one-half (44.8%) of adults age 19 or older have received

their annual influenza vaccine, and less than one-fourth (23.0%) of adults age 19 to 64 who are at high risk for pneumococcal disease have ever been vaccinated against pneumococcal infection. Similarly, only 3 in 10 (30.6%) of adults age 60 years or older have received herpes zoster (shingles) vaccine. Just 2 in 5 (41.6%) of young women age 19 to 26 have received even one of the three recommended doses of human papillomavirus (HPV) vaccine, which can prevent cervical cancer. Finally, only 23.1% of adults age 19 and older for whom vaccination could be assessed have received their recommended dose of tetanus-diphtheria-pertussis (Tdap) vaccine. In addition, racial and ethnic disparities were apparent for all vaccines.



We must improve these rates. By picking up the *Guide*, you've already taken an important first step in making a difference in adult vaccination coverage. With four simple actions, you can have a huge impact on adult vaccination rates:

- **ASSESS** the immunization status of all your patients during every clinical encounter;
- **PROVIDE** a strong recommendation for vaccines that your patients need;
- **ADMINISTER** needed vaccines **or, at a minimum, REFER** your patients to a provider (including pharmacies) who immunizes; and
- **DOCUMENT** vaccines your patients receive from you or from other providers.

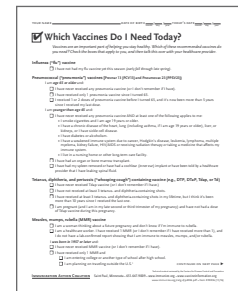
### How do I determine which vaccines adults need?

Adults need different vaccines based on their health, age, lifestyle, and occupational factors – unlike most children, who need vaccines based on age alone. It's a little more complicated to figure out which vaccine(s) an adult needs. One size does not fit all. But the good news is that there are many resources available to help you assess your patient's vaccine needs.

Each February, CDC announces the availability of the adult immunization schedule in the *Morbidity and Mortality Weekly Report (MMWR)*. The current recommended adult immunization schedule is

**Adults need different vaccines based on their health, age, lifestyle, and occupational factors – unlike most children, who need vaccines based on age alone.**

available online at [www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf](http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf). When you visit the site, you'll see that there are two tables of recommendations: one group of recommendations is based on age group, while the other is based on the medical and other conditions of your patient. Multiple footnotes explain the details of the recommendations. This may look a little intimidating at first. However, after you take a few minutes to review the information, you'll find it's not as overwhelming as it might have first appeared. You'll also find some great tools to help with your assessment of adult vaccinations needed, such as IAC's *Which Vaccines Do I*



[www.immunize.org/catg.d/p4036.pdf](http://www.immunize.org/catg.d/p4036.pdf)

*Need Today?* and other screening checklists, available at [www.immunize.org/handouts/screening-vaccines.asp](http://www.immunize.org/handouts/screening-vaccines.asp). And, as we will discuss later in the *Guide*, your state's immunization information system (registry) or your electronic medical record system may include tools to help you

**Your state's immunization information system or your electronic medical record system may include tools to help you determine which vaccinations your patient needs.**

determine which vaccinations your patient needs. All of these tools help with vaccinations needed today and during future visits.



**With a little planning, vaccinating adults is surprisingly manageable.**

### **The *Guide* does not discuss vaccines for children or travelers**

We have limited the *Guide* to routine vaccinations recommended for adults, defined as people who are at least 19 years of age. We also have not included information on vaccinations required for international travel. If your patient is traveling to different countries, immunization information can be found on CDC's travel website, [wwwnc.cdc.gov/travel](http://wwwnc.cdc.gov/travel).

### **Concluding thoughts**

With a little planning, vaccinating adults is surprisingly manageable – and not so surprisingly, this planning is extremely important. Now that you have read this introduction and are motivated to become a vaccinator or increase the number of vaccines you currently provide, you are ready to develop your vaccination services program, one step at a time. Both you and the adults you protect from vaccine-preventable diseases in the months and years to come will be glad you did.

**STEP 1: GETTING STARTED****Materials and Resources for You to Use****► TOOLS FOR PROVIDERS**

**Recommendations from the National Vaccine Advisory Committee: Standards for Adult Immunization Practice (NVAC)** – <http://journals.sagepub.com/doi/pdf/10.1177/003335491412900203>

**Recommended Adult Immunization Schedule, United States (CDC)** – [www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf](http://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf)

**Standards for Adult Immunization Practice (CDC)** [www.cdc.gov/vaccines/hcp/adults/for-practice/standards/index.html](http://www.cdc.gov/vaccines/hcp/adults/for-practice/standards/index.html)

**Standards for Adult Immunization Practice (NAIS)** [www.izsummitpartners.org/adult-immunization-standards](http://www.izsummitpartners.org/adult-immunization-standards)

**Strategies to Improve Adult Vaccination Coverage (IAC)** – [www.immunize.org/catg.d/p2050.pdf](http://www.immunize.org/catg.d/p2050.pdf)

**Suggestions to Improve Your Immunization Services (IAC)** – [www.immunize.org/catg.d/p2045.pdf](http://www.immunize.org/catg.d/p2045.pdf)

**► ADDITIONAL PROVIDER RESOURCES**

**Adult Immunization (ACP)** [www.acponline.org/clinical-information/clinical-resources-products/adult-immunization](http://www.acponline.org/clinical-information/clinical-resources-products/adult-immunization)

**Adult Vaccination Information for Healthcare and Public Health Professionals (CDC)** [www.cdc.gov/vaccines/hcp/adults/index.html](http://www.cdc.gov/vaccines/hcp/adults/index.html)

**Adult Vaccination Resources: For Provider Practices (CDC)** – [www.cdc.gov/vaccines/hcp/adults/for-practice/index.html](http://www.cdc.gov/vaccines/hcp/adults/for-practice/index.html)

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**NOTE:** The publisher of each resource is shown as an acronym in the parentheses following the title. A key to these acronyms is included in *Appendix A: Acronyms and Abbreviations*.

**Adult Vaccination Web Section (IAC)** [www.immunize.org/adult-vaccination](http://www.immunize.org/adult-vaccination)

**Clinic Resources Web Section (IAC)** [www.immunize.org/clinic](http://www.immunize.org/clinic)

**Conversations: Improving Adult Immunizations Rates Using Simple and Strong Recommendations (AAFP)** – [www.aafp.org/patient-care/public-health/immunizations/video.html](http://www.aafp.org/patient-care/public-health/immunizations/video.html)

**Epidemiology and Prevention of Vaccine-Preventable Diseases (“The Pink Book”) (CDC)** [www.cdc.gov/vaccines/pubs/pinkbook/index.html](http://www.cdc.gov/vaccines/pubs/pinkbook/index.html)

**Guide to Adult Immunization (ACP)** [www.acponline.org/clinical-information/clinical-resources-products/adult-immunization/acps-guide-to-adult-immunization](http://www.acponline.org/clinical-information/clinical-resources-products/adult-immunization/acps-guide-to-adult-immunization)

**Immunizations (AAFP)** – [www.aafp.org/patient-care/public-health/immunizations.html](http://www.aafp.org/patient-care/public-health/immunizations.html)

**Immunizations: You Call the Shots (CDC)** [www.cdc.gov/vaccines/ed/youcalltheshots.html](http://www.cdc.gov/vaccines/ed/youcalltheshots.html)

**Immunization Webinar Series (ACP)** [www.acponline.org/clinical-information/clinical-resources-products/adult-immunization/acp-immunization-webinar-series](http://www.acponline.org/clinical-information/clinical-resources-products/adult-immunization/acp-immunization-webinar-series)

**Immunizing Adult Patients: Standards of Practice (CDC)** – [www.cdc.gov/vaccines/hcp/adults/downloads/standards-immz-adults.pdf](http://www.cdc.gov/vaccines/hcp/adults/downloads/standards-immz-adults.pdf)

**National Adult Immunization Plan (NVPO)** [www.hhs.gov/sites/default/files/nvpo/national-adult-immunization-plan/naip.pdf](http://www.hhs.gov/sites/default/files/nvpo/national-adult-immunization-plan/naip.pdf)

**The Vaccine Handbook: A Practical Guide for Physicians (“The Purple Book”) (Marshall)** [www.immunize.org/vaccine-handbook](http://www.immunize.org/vaccine-handbook)

CONTINUED ON NEXT PAGE ►

### STEP 1: GETTING STARTED

## Materials and Resources for You to Use

CONTINUED FROM PREVIOUS PAGE

### ► INFORMATION FOR PATIENTS

**Factsheets on Immunization Topics (NFID)**

[www.nfid.org/publications/factsheets](http://www.nfid.org/publications/factsheets)

**Handouts for Patients and Staff (IAC)**

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

**Vaccinate Your Family (ECBT)**

[www.vaccinateyourfamily.org/adults](http://www.vaccinateyourfamily.org/adults)

**Vaccine Information for the Public (HHS)**

[www.vaccines.gov](http://www.vaccines.gov)

**Vaccine Information for the Public (IAC)**

[www.vaccineinformation.org](http://www.vaccineinformation.org)

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### ► GENERAL INFORMATION

**Adult Vaccination Web Section (NFID)**

[www.adultvaccination.org](http://www.adultvaccination.org)

**IAC Express (IAC)** – [www.immunize.org/express](http://www.immunize.org/express)

**Immunization Action Coalition (IAC)**

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

**National Adult and Influenza Immunization Summit**

**(NAIS)** – [www.izsummitpartners.org](http://www.izsummitpartners.org)

**State Immunization Program Manager Contacts**

**(AIM)** – [www.immunizationmanagers.org/?MemPage](http://www.immunizationmanagers.org/?MemPage)

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### READ CURRENT ISSUE

→ [IAC Express: Issue 1319](#)

August 9, 2017



**Ask the Experts—Question of the Week:** What is the schedule for hepatitis B vaccine administration for infants who...[read more](#)

### Top Stories

- National Immunization Awareness Month is here, with the second week focusing on vaccinations for pregnant women
- Hepatitis A outbreak claims eighth life in southern California
- *Hilleman: A Perilous Quest to Save the World's Children* documentary now available to purchase
- AAP publishes information about coding for influenza vaccination during 2017–18 season
- Study of audio recordings of pediatrician-parent conversations reveals how providers' use of presumptive statements in recommending HPV vaccination can improve uptake of same-day vaccination for patients
- Voices for Vaccines plans four new podcasts, one for each week of National Immunization Awareness Month
- *Chicago Tribune* publishes article about new measures to limit vaccination exemptions in Illinois and across U.S.
- IAC Spotlight: Check out the "Ask the Experts" online archive for answers to immunization questions

### Vaccine Information Statements

- IAC posts Hepatitis B, HPV, and MenB VIS translations in Hindi, Punjabi, and Thai
- IAC posts Multi-vaccine VIS in Farsi
- IAC posts Adenovirus VIS translation in Turkish

### Official Releases and Announcements

- NACCHO releases statement about the President's proposed budget
- WHO issues updated position paper on diphtheria vaccination

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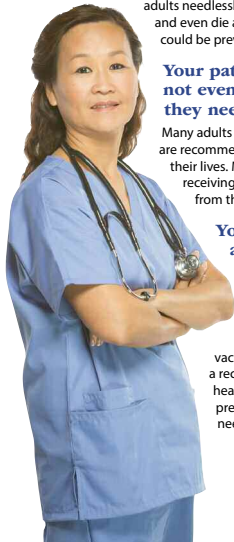
[www.cdc.gov/vaccines/hcp/adults/downloads/standards-immz-adults.pdf](http://www.cdc.gov/vaccines/hcp/adults/downloads/standards-immz-adults.pdf)

## Immunizing Adult Patients: Standards for Practice

Your patients trust you to give them the best advice on how to protect their health. Vaccine-preventable diseases can result in serious illness, hospitalization, and even death. Make adult vaccination a standard of care in your practice.

### Your patients have probably not received all the vaccines they need.

Even though most insurance plans cover the cost of recommended vaccines, adult vaccination rates in the U.S. are extremely low. Each year, tens of thousands of adults needlessly suffer, are hospitalized, and even die as a result of diseases that could be prevented by vaccines.



### Your patients may not even realize that they need vaccines.

Many adults don't know which vaccines are recommended for them throughout their lives. Many also report not receiving vaccine recommendations from their healthcare professional.

### You can make a difference.

Clinicians are the most valued and trusted source of health information for adults. Research shows that most adults believe vaccines are important and that a recommendation from their healthcare professional is a key predictor of patients getting needed vaccines.

### Make Immunization a Standard of Patient Care In Your Practice:

#### 1. ASSESS the immunization status of all your patients at every clinical encounter.

- Stay informed about the latest CDC recommendations for immunization of adults.
- Implement protocols in your office to ensure that patients' vaccine needs are routinely reviewed and patients get reminders about vaccines they need.

#### 2. Strongly RECOMMEND vaccines that your patients need.

- Address patient questions and concerns in clear and understandable language.
- Highlight your positive experiences with vaccination (personal or in your practice).

#### 3. ADMINISTER needed vaccines or REFER your patients to a vaccination provider.

- For vaccines that you stock, make vaccination services as convenient as possible for your patients.
- For vaccines that you don't stock, refer patients to providers in the area that offer vaccination services.

#### 4. DOCUMENT vaccines received by your patients.

- Participate in your state's immunization registry to help your office, your patients, and your patients' other providers know which vaccines your patients have had.
- Follow up to confirm that patients received recommended vaccines that you referred them to get from other immunization providers.

Standards for Adult Immunization Practice emphasize the role of ALL healthcare professionals—whether they provide immunization services or not—in ensuring that adult patients are fully immunized. These standards are published by the National Vaccine Advisory Committee and supported by the Centers for Disease Control and Prevention as well as a number of national medical associations.

**DON'T WAIT.  
VACCINATE!**



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

### Vaccines for Adults\*

	NUMBER OF DOSES
	1 dose every year
Age 11 or older	1 dose (All)
Age 15 or older	1 dose each pregnancy
Age 65 or older	1 dose every 10 years
Age 60 or older	1 dose
Age 65 or older with conditions (HIV, asplenia, sickle cell disease, conditions that cause weakening of the immune system)	1 dose (if not previously received)
Age 65 or older with conditions (HIV, asplenia, sickle cell disease, conditions that cause weakening of the immune system) and who are at higher risk	1 dose (if not previously received)
Age 65 or older with conditions (HIV, asplenia, sickle cell disease, conditions that cause weakening of the immune system) and who are at higher risk	1 or 2 doses
Age 65 or older who have not completed or finished the vaccine series	3 doses
Age 65 or older who are at risk for exposure or have conditions that increase risk	1 or more doses
Age 65 or older who have not had the vaccine or do not have documented evidence of immunity	1 or 2 doses
Age 65 or older who have not had the vaccine or do not have documented evidence of immunity	2 doses
Age 65 or older who are at risk, including adults with conditions that increase risk of disease, or behaviors that increase risk	3 doses
Age 65 or older who are at risk, including adults with conditions that increase risk of disease, HIV/AIDS, removal of splenic tissue, or treatment with drugs who have not had the vaccine or do not have documented evidence of immunity	1 dose

not already had the vaccine

\*Visit [www.cdc.gov/vaccines/schedules/](http://www.cdc.gov/vaccines/schedules/) for a detailed schedule of recommended vaccines and guidelines for administration.

### Coverage of Adult Vaccines

Most private health insurance plans cover the cost of recommended vaccines. If your patients do not currently have health insurance, refer them to [www.HealthCare.gov](http://www.HealthCare.gov) to learn more about health coverage options.

For patients 65 years or older enrolled in Medicare, Medicare Part B covers the cost of influenza and pneumococcal vaccines as well as Hep B vaccine for persons at increased risk of hepatitis. Those with a Medicare Prescription Drug Plan (Part D) or enrolled in a Medicare Advantage Plan (Part C) that offers Medicare prescription drug coverage may also have coverage for additional vaccines like zoster, MMR, and Tdap. Visit [www.Medicare.gov](http://www.Medicare.gov) for more information.

Vaccine coverage for Medicaid beneficiaries varies by state. Contact your State Medicaid Agency for more information.

### In 2014:

- Only 20% of adults 19 years or older had received Tdap vaccine.
- Only 28% of adults 60 years or older had received zoster vaccine.
- Only 20% of adults 19 to 64 years at high risk had received pneumococcal vaccine.

Source: National Health Interview Survey, 2014.

For additional information on adult immunization and resources for patient education, visit: [www.cdc.gov/vaccines/hcp/adults](http://www.cdc.gov/vaccines/hcp/adults).

Last Updated May, 2016

To access the current, ready-to-copy version of this piece, visit

[www.immunize.org/catg.d/p2050.pdf](http://www.immunize.org/catg.d/p2050.pdf)

## Strategies to Improve Adult Vaccination Coverage



Many vaccines are recommended for adults, but **vaccines don't work unless we get them into the arms of the people who need them.** Despite the fact that there are safe and effective vaccines, diseases that can be prevented by these vaccines continue to take a huge toll among adults in the United States.

Low adult vaccination coverage rates occur for a variety of reasons, including low community demand for vaccines, lack of access to vaccination services, and system- and provider-related factors. Successful adult vaccination delivery depends on several patient and provider factors, as well as system issues, such as vaccine supply and reimbursement.

Adults are unlikely to seek vaccination unless they believe that the disease is a threat to them and that there is a vaccine that can prevent the disease. They need to know that they are personally at risk. Even if they know a vaccine is available, adults also may have misconceptions about the vaccine and inordinate concerns about vaccine adverse reactions.

*A knowledgeable provider who uses effective strategies like the ones suggested below can address these issues.*

**EFFECTIVE STRATEGIES**

- 
- Unequivocal provider recommendation**
- 
- Standing orders protocols**
- 
- Reminder and recall systems**
- 
- Assessment and feedback**
- 
- Expansion of patient access**

### An unequivocal provider recommendation is crucial.

- One of the leading reasons adults identify for not receiving a vaccine is the lack of a recommendation from their provider.
- **An unequivocal vaccine recommendation by an adult's healthcare provider is one of the most important interventions to improve patient acceptance of a vaccine.**
- Providers often don't appreciate the power of their recommendation of a vaccine, or the impact of their lack of a recommendation. Most adults rely on their providers to let them know which vaccines are recommended and when they should be given.

### Standing orders protocols work.

- Standing orders protocols are a series of written medical orders authorizing a qualified (i.e., eligible to do so under state law) healthcare professional to assess the need for and administer vaccine to all persons meeting certain criteria (such as age or underlying medical condition), eliminating the need for an individual physician's order for a patient's vaccine.
- Standing orders have been shown to be the most consistently effective means for increasing vaccination rates and reducing missed opportunities for vaccination.
- Standing orders templates for all routinely recommended adult vaccines are available from IAC at [www.immunize.org/standing-orders](http://www.immunize.org/standing-orders).

CONTINUED ON THE NEXT PAGE ►



Saint Paul, Minnesota • 651-647-9009 • [www.immunize.org](http://www.immunize.org) • [www.vaccineinformation.org](http://www.vaccineinformation.org)  
[www.immunize.org/catg.d/p2050.pdf](http://www.immunize.org/catg.d/p2050.pdf) • Item # P2050 (9/17)

### Strategies to Improve Adult Vaccination Coverage

#### Reminder and recall systems are efficient and effective.

- **PATIENT reminder and recall systems** or recalling them if they are overdue, can be as "low tech" as a postcard or systems. State/local immunization is used to generate both reminders and
- **PROVIDER reminder and recall system** that individual patients are due – or call. The reminders and recalls can be deli notification, a flow sheet or checklist with a sticker or stamp. Some IISs ca tion, many electronic medical record These often can be set up to provide

#### Assessment and feedback are helpful tools.

- Assessment and feedback for provide a provider's delivery of one or more v his or her performance.
- Your state/local immunization progr coverage levels, particularly when you nization program (see [www.immunize.org](http://www.immunize.org))

#### Expanding patient access increases rates.

- Expanding patient access to vaccinati availability of vaccinations can be acc
  - increasing or changing hours wh
  - opening an "express lane" that of vaccinations only, or offering "im on weekends.

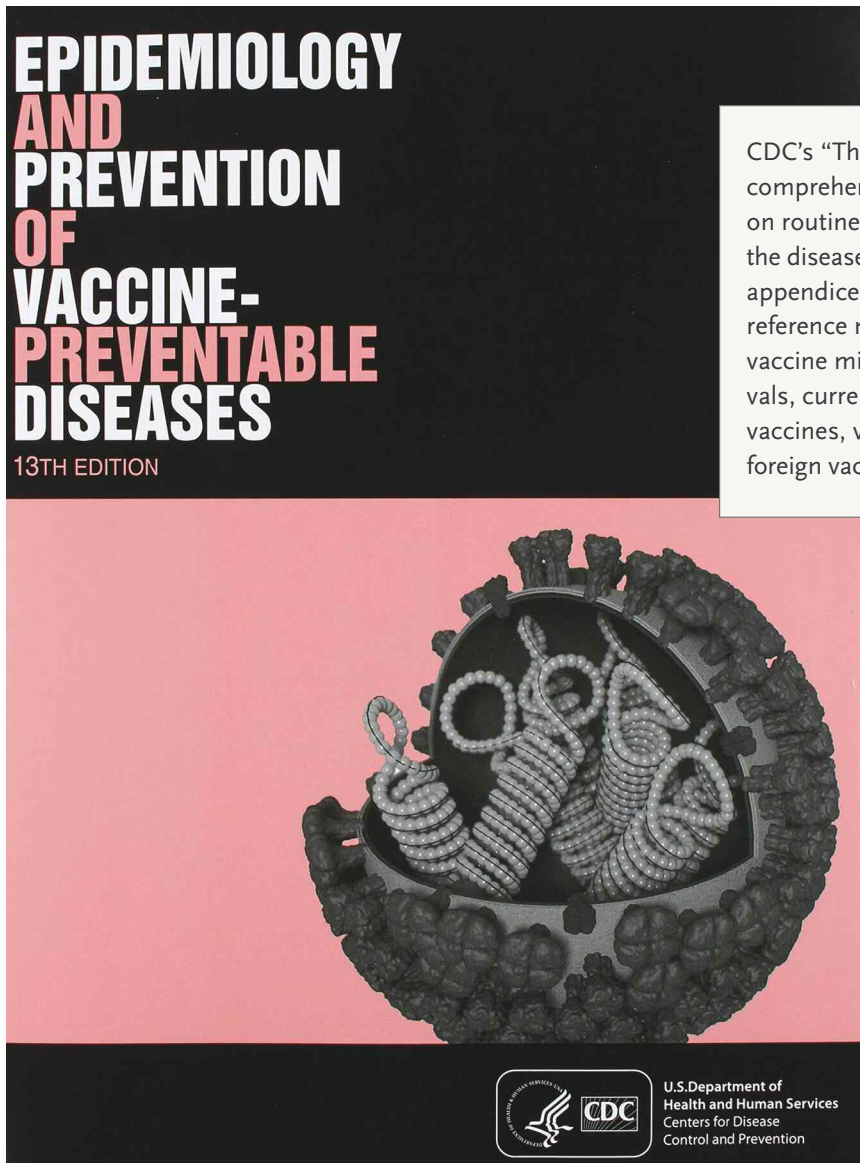
Choosing interventions that work and that are well matched to local needs, priorities, and capabilities is vital to improving vaccination coverage. At the very least, clinicians who see adults in their practice should screen for vaccine indications, recommend the vaccines, and either make the vaccines available in their offices or have a reliable referral site identified where patients can be sent for vaccination services.

Clinicians owe it to their adult patients to provide educational materials about vaccines in their offices, inform patients of the availability of and their need for vaccines, and encourage vaccine use. **A few simple improvements in office practices can save many lives.**

Additional information about strategies to improve adult vaccination rates is available from CDC at [www.cdc.gov/vaccines/hcp/adults/for-practice/increasing-vacc-rates.html](http://www.cdc.gov/vaccines/hcp/adults/for-practice/increasing-vacc-rates.html).

To access the current, ready-to-copy version of this book, visit

[www.cdc.gov/vaccines/pubs/pinkbook/index.html](http://www.cdc.gov/vaccines/pubs/pinkbook/index.html)

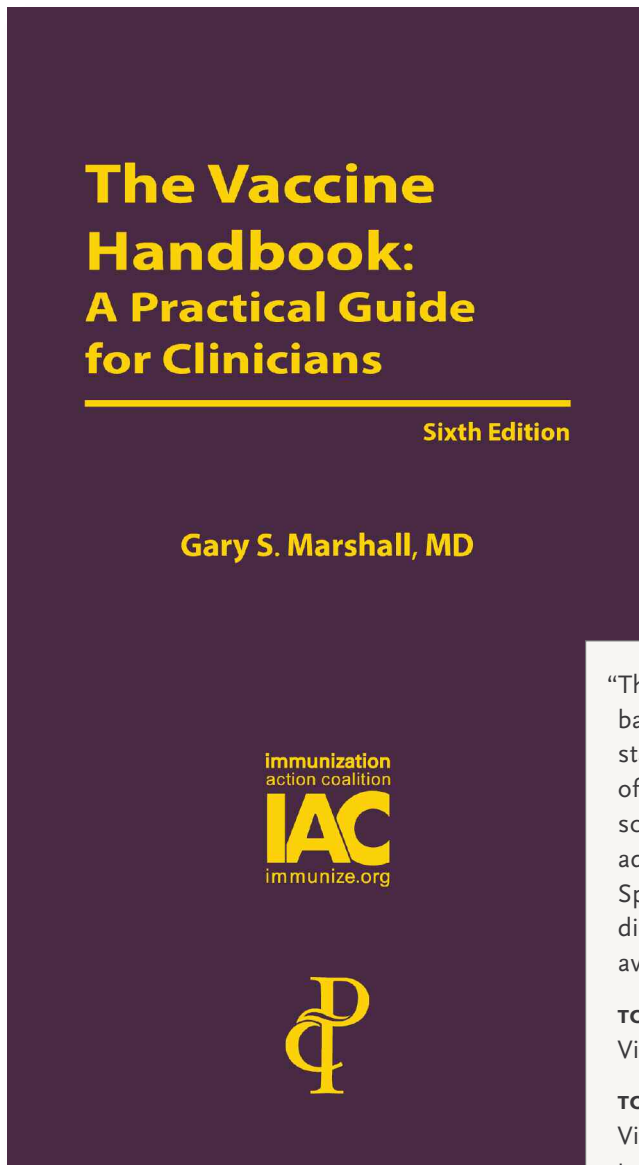


CDC's "The Pink Book" provides comprehensive information on routinely used vaccines and the diseases they prevent. Several appendices contain a wealth of reference materials including: vaccine minimum ages and intervals, current and discontinued vaccines, vaccine contents, foreign vaccine terms, and more.

**"The Pink Book"**

To access information about this book and its app, visit

[www.immunize.org/vaccine-handbook](http://www.immunize.org/vaccine-handbook)



“The Purple Book” contains practical advice and background on vaccine program infrastructure, standards and regulations, business aspects of vaccine practice, general recommendations, schedules, special circumstances, and how to address the concerns of parents and patients. Specific information about vaccine-preventable diseases, the rationale for vaccine use, and available products is included.

**TO ORDER A SOFT-COVER COPY**

Visit [www.immunize.org/vaccine-handbook](http://www.immunize.org/vaccine-handbook)

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“The Purple Book”

