

Overview

A Series on Standards for Adult Immunization Practice



In 2014, the National Vaccine Advisory Committee updated the Standards for Adult Immunization Practice to reflect the critical need for ALL healthcare professionals—whether they provide immunization services or not—to take steps to ensure that adult patients get the vaccines they need.

Patients trust you to give them the best advice on how to protect their health.

Make adult vaccination a standard of care in your practice.

Why should adult immunization be a priority for your practice?

1. **Your patients are probably not getting the vaccines they need.** Even though most private insurance plans cover the cost of recommended vaccines, adult vaccination rates in the United States 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.
2. **Your patients are likely not aware that they need vaccines.** Although adults do believe immunization is important, many don't know which vaccines are recommended for them throughout their lives. Many also report not receiving vaccine recommendations from their healthcare professional.
3. **You play a critical role in ensuring that your patients are fully immunized.** Clinicians are the most valued and trusted source of health information for adults. Your patients rely on you to inform them about the vaccines they need. Research shows that a recommendation from their healthcare professional is the top predictor of patients getting vaccinated.

2014 U.S. Adult Vaccination Rates

Only 20% of adults 19 years or older had received Tdap vaccination. More than 18,000 cases of whooping cough were provisionally reported in 2015. About five in 100 adults with pertussis are hospitalized and others may have complications, which could include pneumonia. Adults can also spread pertussis to infants, who are at most risk for severe illness and death from this disease.

Only 28% of adults 60 years or older had received zoster (shingles) vaccination. Nearly 1 million Americans experience the condition each year, and about half of all cases occur in adults 60 years or older. Older adults are also most likely to experience severe pain from the disease and have postherpetic neuralgia.

Only 20% of adults 19 to 64 years at high risk had received pneumococcal vaccination. While coverage among adults 65 years or older is better, there are still many adults left unprotected. About 67 million adults at increased risk for pneumococcal disease remain unvaccinated.

Only 44% of adults 18 years or older had received flu vaccination during the 2014-2015 flu season. On average, more than 200,000 people are hospitalized each year from influenza-related complications.

Sources: NHIS 2013, NHIS 2014 (MMWR 2016; 64(4)), BRFSS 2014-2015 (www.cdc.gov/flu/fluview)

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Summary of 2014 Standards for Adult Immunization Practice

1. **ASSESS** 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 patients need.

- Address patient questions and concerns in clear and understandable language.
- Explain the benefits of getting vaccinated and potential costs of getting the diseases they protect against.
- Highlight positive experiences with vaccination (personal or in your practice) to reinforce the benefits and strengthen confidence in vaccination.

3. **ADMINISTER** needed vaccines or **REFER** patients to a vaccinating 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 patient, 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.

Proven strategies to increase vaccination rates

In a recent survey of U.S. primary care physicians, only 29% of general internists and 32% of family physicians report assessing vaccination status at every visit.

The CDC recommends the following evidence-based strategies for reducing missed opportunities and improving vaccination rates:

Standing orders authorize nurses, pharmacists, and other healthcare professionals to assess a patient's immunization status and administer vaccinations according to an approved protocol without the need for examination or direct order from the attending physician.

Provider reminder interventions, such as notes in client charts and alerts in electronic medical records, inform providers and their staff that individual patients are due for specific vaccines.

Immunization Information Systems (IIS) support patient vaccination status assessment, reminder and recall interventions, and provider assessment and feedback.

www.TheCommunityGuide.org/vaccines

All healthcare professionals should also ensure that they, and their practice staff, are up-to-date on their OWN vaccinations per ACIP recommendations and consistent with professional guidelines.

www.cdc.gov/vaccines/adults/rec-vac/hcw.html
for more information

For more information on the 2014 Standards and resources for improving adult immunization practice, visit: www.cdc.gov/vaccines/adultstandards

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Vaccine Needs Assessment

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Assessment is the critical first step in ensuring that your adult patients get the vaccines they need for protection against serious vaccine-preventable diseases.

As a standard of care—whether you provide vaccines or not—you should assess your patients' immunization status at *every clinical encounter* and strongly recommend vaccines that they need.

Assessing your patients' vaccination status at every clinical encounter will decrease missed opportunities to vaccinate.^{1, 2, 3}

- Many adults do not schedule annual check-ups or come in for preventive services, therefore it is critical to assess vaccine status whenever they do come in for a visit.
- Some vaccines are indicated for adults based on factors other than age, making it important to assess regularly whether your patients have had lifestyle, health, or occupational changes that may prompt the need for additional vaccines.
- Vaccine recommendations for adults change over time, and your patients may not be up to date with the latest recommendations.

There are simple ways to implement routine vaccine assessment into your office patient flow.

- Give patients a vaccine assessment form at check-in.
- Include standing orders or protocols for nursing staff to assess and administer needed vaccines.
- Integrate vaccine prompts into electronic medical records.

See back for more tips and resources.

Routinely assessing patient vaccination status will make a difference.

Adults think immunization is important, but most don't know which vaccines they need throughout their lives. Research indicates that your recommendation is the strongest predictor of whether patients get vaccinated.⁴ Implement policies to ensure your patients' vaccination needs are routinely reviewed.

For information on insurance coverage of vaccines for adults, visit: www.cdc.gov/vaccines/hcp/adults

U.S. vaccination rates for adults are extremely low.

For example:

- Only 20% of adults 19 years or older have received Tdap vaccination.
- Only 28% of adults 60 years or older have received zoster (shingles) vaccination.
- Only 20% of adults 19 to 64 years old, at high risk, have received pneumococcal vaccination.
- Only 44% of adults 18 years or older had received flu vaccination during the 2014–2015 flu season.

Sources: NHIS 2014 (MMWR 2016; 64(4)), BRFSS 2014–2015 (www.cdc.gov/flu/fluview)

For resources and tips on vaccine recommendation, administration, referral, and documentation, visit:

www.cdc.gov/vaccines/adultstandards

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Tips for Improving Vaccine Assessment in Your Practice

- **Implement standing orders or protocols.** Routinely incorporate vaccine assessment and vaccination the same way you incorporate measuring weight and blood pressure during patient office visits.
Examples: www.immunize.org/standing-orders
- **Give your patients a vaccine questionnaire to complete at check-in.** This can help identify vaccines your patients may need based on factors such as upcoming travel or changes in medical conditions.
Example: www.cdc.gov/vaccines/hcp/adults/downloads/patient-intake-form.pdf
- **Use reminders to help your practice stay on top of needed vaccines that are due soon or are overdue.** These reminders can be generated by a computer system (Electronic Health Record) or immunization registries, or you can make a note of needed vaccines on a patient's vaccination chart.
Example: www.immunize.org/catg.d/p2023.pdf
- **Send your patients reminders about missed vaccines or vaccines that are due soon.** This can help keep vaccines on your patients' radar and encourage them to stay up to date.
Example: <http://www.adultvaccination.org/professional-resources/adult/appointment-reminder-cards.html>
- **Review how your practice does in keeping your patients up to date on vaccines.** This can be done by reviewing a sample of patients' charts or analyzing electronic health record data for your practice. Learn more about the CDC Comprehensive Clinic Assessment Software Application (CoCASA) tool here: www.cdc.gov/vaccines/programs/cocasa/index.html

CDC's recommended Adult Immunization Schedule is available in various formats, including an online scheduling tool and mobile phone application:

www.cdc.gov/vaccines/schedules

To learn more about evidence-based strategies for improving vaccination rates, visit: www.TheCommunityGuide.org/vaccines

Don't forget to review contraindications and precautions for vaccination when assessing your patients' vaccine needs.

Learn more: <http://www.cdc.gov/vaccines/hcp/admin/contraindications-adults.html>

References:

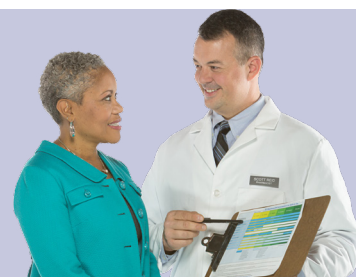
1. Hurley LP, Bridges CB, Harpaz R, Allison MA. US physicians survey regarding adult vaccine delivery: Missed opportunities. *Ann Intern Med.* 2014; 160:161-70.
2. Nowalk MP, Zimmerman RK, Feghali J. Missed opportunities for adult immunization in diverse primary care office settings. *Vaccine.* 2004; 22(25-26):3457-63.
3. Nowalk MP, Zimmerman RK, Cleary SM, Bruehlman RD. Missed opportunities to vaccinate older adults in primary care. *J Am Board Fam Pract.* 2005; 18(1):20-7.
4. Johnson DR, Nichol KN, Lipczynski K. Barriers to Adult Immunization. *Am J Med.* 2008; 121:528-535.

For more information and resources on adult immunization,
visit: www.cdc.gov/vaccines/hcp/adults

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Vaccine Recommendation

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Your recommendation is a critical factor in whether your patients get the vaccines they need.

Routinely assess patient immunization status and strongly recommend vaccines that patients need, whether you stock the vaccines or not.

Recommending vaccines prompts most patients to get immunized.

Research indicates that most adults believe that vaccines are important and are likely to get them if recommended by their healthcare professionals.

For some patients, a clear and strong recommendation may not be enough. You can encourage these patients to make an informed decision about vaccination by sharing critical information.

S

SHARE the tailored reasons why the recommended vaccine is right for the patient given his or her age, health status, lifestyle, occupation, or other risk factors.

H

HIGHLIGHT positive experiences with vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in vaccination.

A

ADDRESS patient questions and any concerns about the vaccine, including side effects, safety, and vaccine effectiveness in plain and understandable language.

R

REMIND patients that vaccines protect them and their loved ones from many common and serious diseases

E

EXPLAIN the potential costs of getting the disease, including serious health effects, time lost (such as missing work or family obligations), and financial costs.

For tips on answering common patient questions and links to patient education materials, see back.

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- Only 20% of adults 19 to 64 years old, at high risk, have received pneumococcal vaccination.
- Only 44% of adults 18 years or older had received flu vaccination during the 2014–2015 flu season

Sources: NHIS 2014 (MMWR 2016; 64(4)), BRFSS 2014–2015 (www.cdc.gov/flu/fluview)

For resources and tips on vaccine assessment, administration, referral, and documentation, visit:

www.cdc.gov/vaccines/adultstandards

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Tips for Addressing Common Questions About Adult Vaccination

Do I really need vaccines?

- All adults need vaccines to help protect against serious diseases that could result not only in poor health, but also missed work, medical bills, and not being able to care for their families.
- You may not have gotten all of your recommended childhood vaccines. Also, the protection from some vaccines you had as a child can wear off over time and you might need a booster (tetanus and whooping cough). Some vaccines are recommended based on your age, job, lifestyle, or health conditions. For example, adults with chronic conditions like heart disease, diabetes, asthma, or COPD are at higher risk for complications from certain diseases like flu and pneumonia.
- Getting vaccinated not only lowers your chance of getting sick, but also lowers the chance that you will spread a serious disease to those around you—including those most vulnerable to severe illness (infants, older adults, and people with chronic health conditions and weakened immune systems).

For tips on addressing common questions about specific adult vaccines, visit:

www.cdc.gov/vaccines/AdultPatientEd

How well do adult vaccines work?

- Vaccines work with the body's natural defenses to reduce the chances of getting certain diseases and suffering from their complications.
- How much protection you will get varies by vaccine and other factors like your age and health, but immunization is the best defense against many of these serious, and sometimes deadly, diseases.
- The greatest risk of vaccine-preventable diseases occurs among people who are not vaccinated.

Are adult vaccines safe?

- Vaccines are one of the safest ways to protect your health.
- Vaccines go through years of testing before they can be licensed by the Food and Drug Administration (FDA). Once a vaccine is licensed, research is reviewed by medical and scientific experts to make recommendations on who should be vaccinated. Even after a vaccine is licensed, CDC and FDA continue to carefully monitor the safety of vaccines.
- It is safe to receive vaccinations while taking prescription medications. If you take medication that suppresses your immune system, you may not be able to get certain live vaccines including MMR, varicella, and shingles vaccines.

Patients vary in their level of knowledge about immunization and their preferences for learning about it.

Find free education materials for your patients:

www.cdc.gov/vaccines/AdultPatientEd

What are possible risks from adult vaccines?

- Side effects from vaccines are usually minor, such as feeling sore where you get the shot or a slight fever, and go away within a few days.
- Some people may have allergic reactions to vaccines, but serious or long-term effects are rare.

For additional information and resources on adult immunization, visit: www.cdc.gov/vaccines/hcp/adults

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.

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Overview of Recommended Vaccines for Adults*

VACCINE	WHO NEEDS IT	NUMBER OF DOSES
Seasonal Influenza	ALL Adults	1 dose every year
Tdap	ALL Adults who have not received a dose since age 11 or older Women should receive during every pregnancy	1 dose (All) 1 dose each pregnancy
Td	ALL Adults	1 dose every 10 years
Zoster	Adults 60 years or older	1 dose
Pneumococcal Conjugate	Adult 65 years or older Adults 64 or younger with certain medical conditions (HIV, asplenia, sickle cell disease, cerebrospinal fluid leaks, cochlear implants, or conditions that cause weakening of the immune system)	1 dose (if not previously received) 1 dose (if not previously received)
Pneumococcal Polysaccharide	Adults 65 years or older Adults 64 years or younger with certain medical conditions and who are at higher risk of infection	1 dose 1 or 2 doses
HPV	Adults 26 years or younger who have not started or finished the vaccine series	3 doses
Meningococcal	Adults who have not had the vaccine and are at risk for exposure or have damaged spleen	1 or more doses
MMR	Adults born during or after 1957 who have not had the vaccine or do not have documented evidence of immunity	1 or 2 doses
Varicella	Adults who have not had chickenpox or do not have documented evidence of immunity	2 doses
Hep A	Adults who are at risk and have not had the vaccine series	2 doses
Hep B	Adults who have not had the vaccine series and who are at risk, including adults with diabetes, end-stage kidney disease, chronic liver disease, or behaviors that increase risk	3 doses
Hib	Adults with special health conditions (sickle cell disease, HIV/AIDS, removal of the spleen, bone marrow transplant, or cancer treatment with drugs) who have not already had the vaccine	1 dose

*Visit 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 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 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.

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Vaccine Documentation

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Since patients can get their vaccines from many different healthcare professionals, assessing current vaccination status for patients can be challenging but it is very important.

Keep an up-to-date record of the vaccines your patients have received to make sure they have the best protection against vaccine-preventable diseases.

To ensure patients get the vaccines they need and to prevent unnecessary vaccination, you should:

- Record vaccination in patients' medical records
- Provide documentation of vaccines received to patients for their personal records
- Document vaccinations in immunization information systems (IIS)

IIS are confidential, community-wide, computerized databases that record vaccines administered by participating healthcare professionals. Documenting vaccines into IIS can benefit your practice by:

- Consolidating vaccination records for your patients
- Helping you assess your patients' immunization status
- Making sure your patients have completed necessary vaccine series (for example, all three doses of hepatitis B vaccine)
- Reducing chances for unnecessary doses of vaccine or missed opportunities to provide vaccines
- Facilitating use of reminder and recall notifications to send to patients
- Making calculation of your office's immunization coverage rates easier

For more information on how to access IIS, contact your state coordinator. (See back for details.)

Even if you do not administer vaccines in your office, follow up with your patients to ensure they received the recommended vaccines from another immunization provider.

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For resources and tips on vaccine assessment, recommendation, administration, and referral, visit:

www.cdc.gov/vaccines/adultstandards

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Resources for Documenting Vaccines Received by Your Patients

- Learn more about Immunization Information Systems (IIS)
www.cdc.gov/vaccines/programs/iis/training.html
- Reach out to your state's main contact regarding questions about your state or local registry, including whether you may be able to automatically transmit immunization data from your electronic medical records to your state's IIS
www.cdc.gov/vaccines/programs/iis/contacts-registry-staff.html
- Provide your patient with a vaccine administration record
www.immunize.org/catg.d/p2023.pdf
- Learn how to protect the privacy, confidentiality, and security of your patients' information
www.immregistries.org/resources/privacy-security-confidentiality
- Learn more about meaningful use of Electronic Health Record systems and IIS
www.cdc.gov/vaccines/programs/iis/meaningful-use/index.html
www.cdc.gov/ehrmeaningfuluse/introduction.html

Documenting vaccinations in IIS fulfills one of the Centers for Medicare & Medicaid Services "Core" Meaningful Use criteria. Learn more at:

www.healthit.gov/providers-professionals/achieve-meaningful-use/core-measures-2/immunization-registries-data-submission

**For more information and resources on adult immunization,
visit: www.cdc.gov/vaccines/hcp/adults**