

Meningococcal Vaccines and Disease Prevention

Maine Immunization Program

April 27, 2022



OBJECTIVES

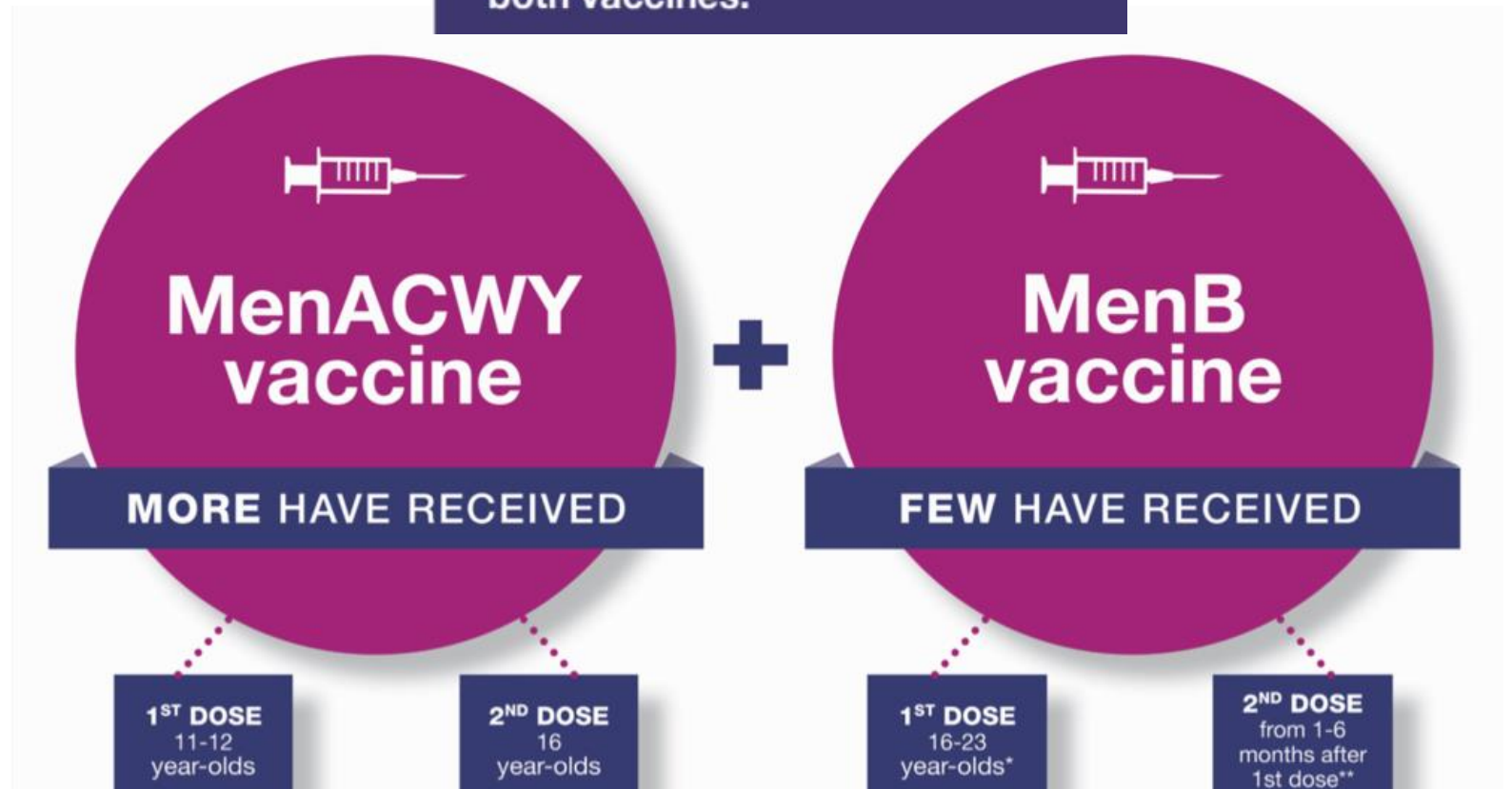
- Overview of Meningococcal Vaccines
 - New Impact MenB forecaster
- MenQuadfi Representative- Neal Dwelley
 - New vaccine available for order
- Meningococcal Disease and Prevention Overview – Jim Palazzo
- Recommendations from Dr. Amy Belisle, Maine’s Chief Child Health Officer; and Dr. Lawrence Losey, Pediatrician with Mid Coast Pediatrics
- Impact update & Maine MCV4 vaccination rates – Amanda Luciano
- Resources
- Q&A

Meningococcal meningitis is mainly caused by 5 types of meningococcal bacteria - ABCWY – two separate meningitis vaccines are necessary to be fully immunized against the disease: MenACWY and MenB.

IT TAKES TWO TYPES OF VACCINES

to be fully immunized against meningococcal disease.

Few people have received both vaccines.



Meningococcal Vaccines

MenACWY Vaccines

Menactra, Menveo and MenQuadfi:

- Protects against **4** types of the bacteria that cause meningococcal disease (serogroups A, C, W, and Y)
- Give 2 doses to preteens and teens
 - **give to certain people at increased risk of meningococcal disease. See CDC recommendations for details
 - [Meningococcal Vaccine Recommendations | CDC](#)

MenB Vaccines

Bexsero:

- Give a 2-dose series to people 16 through 23 years old who are not at increased risk of meningococcal disease.
 - **Give a 2-dose series to people 10 years or older at increased risk of meningococcal disease. [Meningococcal Vaccine Recommendations | CDC](#)

Trumenba:

- Give a 2-dose series to people 16 through 23 years old who are not at increased risk of meningococcal disease.
 - **Give a 3-dose series to people 10 years or older at increased risk of meningococcal disease.
 - [Meningococcal Vaccine Recommendations | CDC](#)

Meningococcal Vaccines

Meningococcal conjugate (MenACWY) vaccines

- Menactra®
- Menveo®
- MenQuadfi®

Serogroup B meningococcal (MenB) vaccines

- Bexsero®
- Trumenba®

[Adolescent Meningococcal Vaccination: For Providers | CDC](#)

Meningococcal ACWY Vaccine Recommendations

Meningococcal ACWY Vaccine Recommendations by Age and Risk Factor

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

MenACWY = Menactra, MenQuadfi (Sanofi Pasteur); Menveo (GlaxoSmithKline)
 MenACWY-D = Menactra MenACWY-CRM = Menveo MenACWY-TT = MenQuadfi

Routine Recommendations for Use of Meningococcal A,C,W,Y Vaccine (MenACWY)

This table covers routine vaccination of preteens and teens, as well as catch-up vaccination of teens and young adults.

AGE OF PATIENT	VACCINATION HISTORY	RECOMMENDED MENACWY SCHEDULE
Age 11 through 12 years	None	Give dose #1 of MenACWY.
Age 13 through 15 years	None	Give catch-up dose #1 of MenACWY.
Age 16 years	1 prior dose	Give dose #2 of MenACWY.
Age 16 through 18 years	None	Give 1 dose of MenACWY.
	1 prior dose when younger than 16 yrs	Give dose #2 of MenACWY.
Age 19 through 21 years	None, or 1 prior dose when younger than 16 yrs	Consider giving 1 dose of MenACWY.
First year college students living in residence halls	None, or 1 prior dose when younger than 16 yrs, or 1 prior dose since 16th birthday, but more than 5 yrs previously	Give 1 dose of MenACWY.

[Meningococcal ACWY Vaccine Recommendations by Age and Risk Factor \(immunize.org\)](http://immunize.org)

Meningococcal B Vaccine Recommendations

Meningococcal B Vaccine Recommendations by Age and Risk Factor

This document covers MenB vaccine. For information on vaccine that provides protection against meningococcal serogroup A, C, W, and Y disease, see www.immunize.org/catg.d/p2018.pdf.

Meningococcal Serogroup B Vaccines

- | | |
|--|---|
| <ul style="list-style-type: none"> • Bexsero (MenB-4C, GlaxoSmithKline) • Trumenba (MenB-FHbp, Pfizer) | <p>The two brands of MenB vaccines are not interchangeable. The series, and booster doses when indicated, must be started and completed with the same brand of vaccine.¹</p> |
|--|---|

Recommendations for Meningococcal Serogroup B Vaccination (Shared Clinical Decision-Making) for People Who Are Not in a Risk Group

WHOM TO VACCINATE	VACCINATION SCHEDULE
<p>Teens and young adults ages 16 through 23 years based on shared clinical decision-making (those who want to be vaccinated based on the risk and benefits of the vaccine). The preferred age for vaccination is 16 through 18 years.</p>	<p>Administer either</p> <ul style="list-style-type: none"> • Bexsero: Give 2 doses, 4 weeks apart, or • Trumenba: Give 2 doses 6 months apart. If dose #2 is administered earlier than 6 months after dose #1, give a third dose at least 4 months after dose #2.

[Meningococcal B Vaccine Recommendations by Age and Risk Factor \(immunize.org\)](http://immunize.org)

Meningococcal B Vaccine is now in the ImmPact vaccine Forecaster!



Meningococcal B vaccine will not show up as due in the forecaster until the patient's 16th birthday as this is the ACIP recommendation for MOST individuals.

Current Age: 16 years, 1 day

Patient Notes (0) [view or update notes](#)

[Immunization History](#)

Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
This patient has no immunizations associated with it.								
Vaccines Recommended by Selected Tracking Schedule								
Select	Vaccine Group	Vaccine	Earliest Date	Recommended Date	Past Due Date			
<input type="checkbox"/>	COVID-19	SARS-COV-2 (COVID-19) vaccine, UNSPECIFIED	04/14/2024	04/14/2025	04/14/2025			
<input type="checkbox"/>	HepA	HepA, NOS	04/14/2007	04/14/2007	11/14/2007			
<input type="checkbox"/>	HepB	HepB, NOS	04/14/2006	04/14/2006	07/14/2006			
<input type="checkbox"/>	HPV	HPV, NOS	04/14/2015	04/14/2017	05/14/2019			
<input type="checkbox"/>	Influenza-seasn	Flu NOS	04/14/2015	08/01/2021	04/14/2015			
<input type="checkbox"/>	Meningo	MCV4, NOS	04/10/2022	04/14/2022	04/14/2024			
<input type="checkbox"/>	Meningococcal B	Meningococcal B, NOS	04/14/2022	04/14/2022	04/14/2022			
<input type="checkbox"/>	MMR	MMR	04/14/2007	04/14/2007	08/14/2007			
<input type="checkbox"/>	Polio	Polio-Inject	05/26/2006	06/14/2006	07/14/2006			
<input type="checkbox"/>	Td/Tdap	Tdap	04/14/2013	04/14/2013	04/14/2013			
<input type="checkbox"/>	Varicella	Varicella	04/14/2019	04/14/2019	04/14/2019			

- MenB vaccines are licensed for persons aged 10–25 years in the United States
- The preferred age for receipt is 16 through 18 years so adolescents have protection during the ages of increased risk
- MenB vaccines are not approved for use in people under 10 years old
- The two MenB vaccines are not interchangeable
- MenACWY and MenB vaccines can be given at the same visit or at any time before or after the other

Meningococcal B Vaccine

Bexsero

2 doses series

Administer dose #2 at least 1 month after the first dose

Meningococcal Vaccination: What Everyone Should Know | CDC

Current Age: 16 years, 1 day
Patient Notes (0) [view or update notes](#)

Immunization History

[Add New Imms](#) [Add Historical Imms](#) [Edit Patient](#) [Reports](#) [Print Record](#) [Print Confidential Record](#)

Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
Meningococcal B	04/15/2022	1 of 2	Meningococcal B, OMV [BEXSERO ®]	Full				

Vaccines Recommended by Selected Tracking Schedule

Select	Vaccine Group	Vaccine	Earliest Date	Recommended Date	Past Due Date
<input type="checkbox"/>	COVID-19	SARS-COV-2 (COVID-19) vaccine, UNSPECIFIED	04/14/2024	04/14/2025	04/14/2025
<input type="checkbox"/>	HepA	HepA, NOS	04/14/2007	04/14/2007	11/14/2007
<input type="checkbox"/>	HepB	HepB, NOS	04/14/2006	04/14/2006	07/14/2006
<input type="checkbox"/>	HPV	HPV, NOS	04/14/2015	04/14/2017	05/14/2019
<input type="checkbox"/>	Influenza-seasn	Flu NOS	04/14/2015	08/01/2021	04/14/2015
<input type="checkbox"/>	Meningo	MCV4, NOS	04/10/2022	04/14/2022	04/14/2024
<input type="checkbox"/>	Meningococcal B	MenB, Bexsero	05/13/2022	05/13/2022	06/15/2022

Meningococcal B Vaccine

Trumenba

2 doses series*

Administer second dose 6 months after the first dose

Not shown on the forecaster as this is for a small population:

**Administer 3 doses to people 10 years of age or older who are at increased risk for meningococcal disease. This includes during outbreaks of serogroup B meningococcal disease. Administer the second dose 1 to 2 months after the first dose. Administer the third dose 6 months after the first dose.*

Meningococcal Vaccination: What Everyone Should Know | CDC

Current Age: 16 years, 1 day
Patient Notes (0) [view or update notes](#)

Immunization History

Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
Meningococcal B	04/15/2022	1 of 2	Meningococcal B, recombinant [Trumenba ®]	Full				

Vaccines Recommended by Selected Tracking Schedule

Select	Vaccine Group	Vaccine	Earliest Date	Recommended Date	Past Due Date
<input type="checkbox"/>	COVID-19	SARS-COV-2 (COVID-19) vaccine, UNSPECIFIED	04/14/2024	04/14/2025	04/14/2025
<input type="checkbox"/>	HepA	HepA, NOS	04/14/2007	04/14/2007	11/14/2007
<input type="checkbox"/>	HepB	HepB, NOS	04/14/2006	04/14/2006	07/14/2006
<input type="checkbox"/>	HPV	HPV, NOS	04/14/2015	04/14/2017	05/14/2019
<input type="checkbox"/>	Influenza-seasn	Flu NOS	04/14/2015	08/01/2021	04/14/2015
<input type="checkbox"/>	Meningo	MCV4, NOS	04/10/2022	04/14/2022	04/14/2024
<input type="checkbox"/>	Meningococcal B	MenB, Trumenba	10/15/2022	10/15/2022	11/15/2022

[For more information : Meningococcal Vaccine Administration | CDC](#)

MAINE COUNTY QUARTERLY IMMUNIZATION REPORT CARD

Immunization Rate Assessment Reports

Immunizations remain the single most effective way to protect Mainers against Disease Surveillances and some cancers. The Maine Immunization Program reviews state and national data to assess and improve immunization rates, identify populations at risk, and measure the impact of current initiatives.



Immunization reports for each of the 16 Maine counties can be downloaded as a PDF by clicking the county name in the map (left).

- Jump to other reports (below):**
- [COVID-19 Dashboards](#)
 - [Healthcare Worker Immunization Assessments](#)
 - [Healthcare Worker Influenza Assessments](#)
 - [Childcare Facility Assessments](#)
 - [Post-Secondary Immunization Assessments](#)
 - [School Age Immunization Assessments](#)
 - [National Immunization Survey – Childhood](#)
 - [National Immunization Survey – Adolescent](#)

* Population for 13yrs are the number of adolescents in Maine IIS, ImmPact, associated to immunization sites by provider location

[Immunization Rate Assessment Reports](#) | [MIP](#) | [MeCDC](#) | [Maine DHHS](#)

MenACWY (Meningococcal Conjugate) – 13YR old immunized by age 13 with 1 dose of MCV4

COUNTY MEASURE – 13YRS OF AGE	COUNTY %	COUNTY RANK
KENNEBEC	89.3	1
SOMERSET	86.5	2
OXFORD	84.7	3
PENOBSCOT	84.6	4
ANDROSCOGGIN	84.2	5
FRANKLIN	84.2	6
YORK	83.8	7
HANCOCK	82.8	8
CUMBERLAND	82.0	9
KNOX	81.6	10
AROOSTROOK	80.9	11
WASHINGTON	80.3	12
PISCATAQUIS	79.7	13
WALDO	79.6	14
LINCOLN	78.8	15
SAGADAHOC	75.3	16
MAINE AVG	83.5	

Data as of: December 31, 2021

ACIP Shared Clinical Decision- Making Recommendations

[ACIP Shared Clinical Decision-Making Recommendations | CDC](#)

Meningococcal B (MenB) vaccination for adolescents and young adults aged 16–23 years

- **Q: How do shared clinical decision-making recommendations differ from routine, catch-up, and risk-based immunization recommendations?**
 - A: Unlike routine, catch-up, and risk-based recommendations, shared clinical decision-making vaccinations are not recommended for everyone in a particular age group or everyone in an identifiable risk group. Rather, shared clinical decision-making recommendations are individually based and informed by a decision process between the health care provider and the patient or parent/guardian.
 - The key distinction between routine, catch-up, and risk-based recommendations and shared clinical decision-making recommendations is the default decision to vaccinate. For routine, catch-up, and risk-based recommendations, the default decision should be to vaccinate the patient based on age group or other indication, unless contraindicated. For shared clinical decision-making recommendations, there is no default—the decision about whether or not to vaccinate may be informed by the best available evidence of who may benefit from vaccination; the individual’s characteristics, values, and preferences; the health care provider’s clinical discretion; and the characteristics of the vaccine being considered.
- **Q: Which individuals are recommended to be vaccinated against meningococcal serogroup B disease who are not in risk groups?**
 - A: ACIP recommends that a MenB vaccine series may be administered to people 16 through 23 years of age with a preferred age of vaccination of 16 through 18 years, subject to shared clinical decision-making (SCDM). SCDM gives clinicians an opportunity to discuss the value of MenB vaccination with their patients to make a decision together about the individual’s need or desire for the vaccine based on risks, benefits, and wish for protection from the disease.
- **Q: What resources are available for providers who want to implement these recommendations?**
 - A: For every ACIP recommendation, CDC publishes a policy note in the *Morbidity and Mortality Weekly Report* (MMWR), which provides background and considerations on each recommendation. CDC will also develop vaccine-specific guidance to help clinicians understand and apply shared clinical decision-making recommendations. Health care providers can find information on ACIP’s recommendations on the [ACIP Vaccine Recommendations and Guidelines](#) page.

[Meningococcal B Vaccine: IAC Answers Your Questions \(immunize.org\)](#)

Maine School Immunization Requirements

As of September 1, 2021 –

Maine School Immunization Requirements

All children attending a public or private school in Maine MUST have the following immunizations:

A minimum of:

Required for Kindergarten entry:

- ❖ 5 DTaP (4 DTaP if 4th is given on or after 4th birthday)
- ❖ 4 Polio (3 Polio if 3rd is given on or after 4th birthday)
- ❖ 2 MMR (measles, mumps, rubella)
- ❖ 1 Varicella (chickenpox) or reliable history of disease

In addition to the immunizations above, your child will also need the following:

Required for 7th grade entry:

- ❖ 1 Tdap (If the child has not received the primary series for DTaP prior to 7 years old, please follow the Tdap/Td catch up guidance for [7-10 year olds](#) or for [10 – 18 year olds](#))
- ❖ 1 Meningococcal Conjugate Vaccine (MCV4)

Required for 12th grade entry:

- ❖ 2 MCV4, only one dose is required if the 1st dose is given on or after 16th birthday

❖ Each immunization entry must include:

Vaccine type, date, administered and the name of the provider

If you have any questions or need additional information, please call:

Office of School and Student Supports
Maine Department of Education
School Nurse Consultant
(207) 624-6688

Maine Immunization Program
Maine Centers for Disease Control
Maine Dept. of Health & Human Services
(207) 287-3746 or (800) 867-4775
TTY Users Call Maine Relay 711
www.ImmunizeME.org



Revised 7/26/2021



All children enrolled in a public or private school in Maine must have the following immunizations.

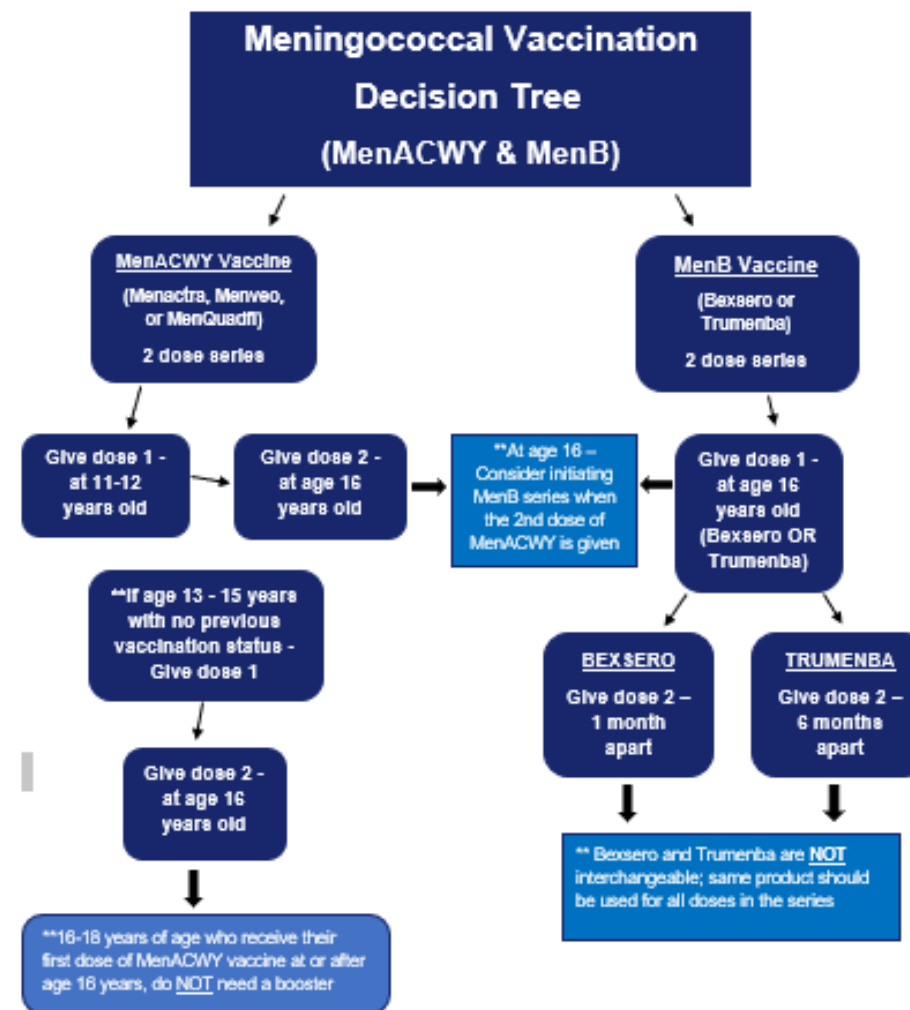
OR

- Medical exemption for one or all vaccines
- Laboratory evidence of immunity to specific diseases or reliable history of disease documented by a physician or other primary care provider
- Philosophical or religious exemptions are only allowable for students with an IEP and exemption in place prior to September 1, 2021
- Each immunization entry must include the vaccine type, date administered and the name of the provider.

[School-Immunization-Requirements.pdf \(maine.gov\)](#)

[ME Immunization Requirements for Schools 9-25-2021.pdf \(maine.gov\)](#)

Meningococcal Vaccination Decision Tree (MenACWY & MenB)



For more information: [Birth-18 Years Immunization Schedule | CDC](#) / [Meningitis B Action Project / Meningococcal Vaccination | CDC](#)

Maine Immunization Program 207-287-3746

ImmunizeME.DHHS@maine.gov



Educational Graphics & Resources



- [MenB Student Hub — Meningitis B Action Project](#)
- [Meningitis B Action Project](#)
- [Edu Graphics — Meningitis B Action Project](#)

WHAT IS MENINGOCOCCAL MENINGITIS?

Meningococcal bacteria can cause a life-threatening bloodstream infection (sepsis) or meningitis (infection of the lining around the brain), or both.

It can attack without warning and **SYMPTOMS INCLUDE:**

IT'S MORE COMMON THAN YOU THINK
Meningococcal meningitis can affect all ages, and it can occur anywhere.

It is more common among those 16-23 because of how young people socialize	Meningitis B is more than 5x more common in college students vs. non-college students	Meningitis B cases have been reported in 30+ college campuses between 2013-January 2022
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FEW ARE FULLY VACCINATED against meningococcal meningitis.

Nearly **8 OUT OF 10** 17 year olds have NOT received their first dose of the MenB vaccine.

It can kill in as little as **24 HOURS** or cause permanent complications: brain damage, hearing loss, learning disabilities or limb amputations.

WHY DOES THIS MATTER?
It takes two types of meningitis vaccines – MenACWY and MenB – to be fully vaccinated against meningococcal meningitis, but few people have received both vaccines. Ask your healthcare provider today.

GET INFORMED. MENINGITISACTIONPROJECT.ORG

Meningitis B Action Project
a joint initiative by The Kimberly Coffey Foundation and The Emily Stillman Foundation

Sources: Centers for Disease Control and Prevention, World Health Organization, National Foundation for Infectious Diseases, Journal of the Pediatric Infectious Diseases Society. See meningitisactionproject.org for details.

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BROCHURE



INFOGRAPHIC



POWERPOINT SLIDES



OUTREACH EMAIL



Visit meningitisbactionproject.org/forcolleges to download any of these materials.

Interested in receiving hard copies? Get in touch: info@meningitisbactionproject.org.

You're 16...

We Recommend These Vaccines For You!

You have the rest of your life in front of you. Be sure you're protected against these serious diseases!



This vaccine	helps protect you from...	Dose(s) you need at this age
Meningitis vaccine against types A, C, W, and Y (MenACWY) <hr/> Meningitis vaccine against type B (MenB)	the most serious types of meningitis that can cause: <ul style="list-style-type: none"> Dangerous infections of the brain and spinal cord Blood infections that can lead to death within 24 hours Brain injury, limb amputations, deafness, skin grafts, and kidney damage 	MenACWY vaccine <ul style="list-style-type: none"> Dose #2 at age 16 (Dose #1 at age 11-12) <hr/> MenB vaccine (talk with your provider about this vaccine) <ul style="list-style-type: none"> Dose #1 at age 16 Dose #2 is given 1 or 6 months after dose #1, depending on the vaccine brand used
Human Papillomavirus (HPV) vaccine	viruses that can cause: <ul style="list-style-type: none"> Cancers of the cervix Cancers of the penis, vagina, vulva, and anus Cancers of the throat Genital warts 	HPV vaccine <ul style="list-style-type: none"> The vaccine series is given as 2 or 3 doses, beginning at age 11-12. Ask your provider if you're up to date with this vaccine
Flu vaccine (influenza)	a virus that can cause: <ul style="list-style-type: none"> High fevers Severe body aches everywhere Serious complications, including pneumonia, hospitalization, and death 	Influenza vaccine <ul style="list-style-type: none"> 1 dose every year

If you're behind on your shots, you may need these vaccines, too. Check with your provider.

- Chickenpox (varicella)
- Hepatitis A
- Hepatitis B
- MMR (measles, mumps, rubella)
- Tdap (tetanus, diphtheria, pertussis/whooping cough)
If you're pregnant, you'll need an additional dose.

Remember: Getting shots is better than getting these diseases. Get protected!

immunization action coalition
AC
 immunize.org
 Saint Paul, Minnesota • 651-647-9009
 www.immunize.org • www.vaccineinformation.org
 www.immunize.org/catg.d/p4022.pdf • Item #P4022 (10/19)

SAHM
 SOCIETY FOR ADOLESCENT
 HEALTH AND MEDICINE

Summary of Recommendations for Child/Teen Immunization* (Age birth through 18 years)

Vaccine name and route	Schedule for routine vaccination and other guidelines (any vaccine can be given with another, unless otherwise noted)	Schedule for catch-up vaccination and related issues	Contraindications and precautions (mild illness is not a contraindication)
Meningococcal conjugate, quadrivalent (MenACWY) Menactra, Menveo, MenQuadfi <i>Give IM</i>	<ul style="list-style-type: none"> Give a 2-dose series of MenACWY with dose #1 at age 11-12yrs and dose #2 at age 16yrs. If unvaccinated at 11-12yrs, give dose #1 at age 13 through 15yrs. Give dose #2 at 16 through 18yrs with a minimum interval of at least 8wks between doses. If unvaccinated at 11 through 15yrs, give dose #1 at 16 through 18yrs. For first year college students living in a residence hall, regardless of age: <ul style="list-style-type: none"> o If unvaccinated, give 1 dose. o If history of 1 dose given when younger than age 16, give dose #2. o If most recent dose given after 16th birthday and more than 5 years have elapsed, give 1 dose. Give Menveo to children age 2-18m with persistent complement component deficiency, complement inhibitor use, HIV infection, or anatomic/functional asplenia; give at ages 2, 4, 6, 12-15m. For unvaccinated or partially vaccinated children age 7-23m with persistent complement component deficiency: 1) if age 7-23m and using Menveo, give a 2-dose series at least 3m apart with dose #2 given after age 12m or, 2) if age 9-23m and using Menactra, give a 2-dose series at least 3m apart. Give any brand of MenACWY to unvaccinated children age 24m and older with persistent complement component deficiency or anatomic or functional asplenia; give 2 doses, 2m apart. If Menactra is given, it must be separated by 4wks from the final dose of PCV13. Give age-appropriate series of meningococcal conjugate vaccine (brand must be licensed for age of child) to 1) children age 2m and older at risk during a community outbreak attributable to a vaccine serogroup and 2) children age 2m and older traveling to or living in countries with hyperendemic or epidemic meningococcal disease. Prior receipt of MenHibrix is not sufficient for children traveling to the meningitis belt or the Hajj. 	<ul style="list-style-type: none"> If previously vaccinated and risk of meningococcal disease persists, revaccinate with MenACWY in 3yrs (if previous dose given when younger than age 7yrs) or in 5 yrs (if previous dose given at age 7yrs or older). Then, give additional booster doses every 5 yrs if risk continues. Minimum ages: 2m Menveo; 9m Menactra; 2yrs MenQuadfi. A catch-up dose of MenACWY may be given at age 19 through 21 yrs to those who did not receive a dose after their 16th birthday. If using Menactra in a high-risk child, it should be given before or at the same visit as DTaP is administered. MenACWY vaccine may be given concomitantly with MenB vaccine. 	Contraindication History of severe allergic reaction (e.g., anaphylaxis) to a previous dose or to a vaccine component. Precaution <ul style="list-style-type: none"> Moderate or severe acute illness, with or without fever. For MenB only: pregnancy.
Meningococcal serogroup B (MenB) Bexsero and Trumenba <i>Give IM</i>	<ul style="list-style-type: none"> Teens age 16 through 18yrs may be vaccinated based on shared clinical decision-making. Give 2 doses of either MenB vaccine: Bexsero, spaced 1m apart; Trumenba, spaced 6m apart. For children age 10yrs and older with persistent complement component deficiencies or complement inhibitor use, functional or anatomic asplenia, including sickle cell disease, or who are at risk during a community outbreak of serotype B, give either 2 doses of Bexsero, 1m apart, or 3 doses of Trumenba on a 0, 1-2, and 6m schedule. 	<ul style="list-style-type: none"> At-risk children (see 2nd bullet in column to left) should receive a 1-dose booster 1 year after completing the primary series, followed by boosters every 2-3 years if risk continues. Minimum age: 10yrs. The brands of MenB vaccine are not interchangeable. If the brand of MenB vaccine used for the primary series is unknown or unavailable, complete a primary series with the available brand. MenB vaccine may be given concomitantly with MenACWY vaccine. 	

Immunization Action Coalition • Saint Paul, Minnesota • 651-647-9009 • www.immunize.org • www.vaccineinformation.org | www.immunize.org/catg.d/p2010.pdf • Item P2010 (7/20)

Summary of Recommendations for Child/Teen Immunization (immunize.org)

You're 16 ... We Recommend These Vaccines For You! (immunize.org)

Resources

- [ACIP Meningococcal Vaccine Recommendations | CDC](#)
- [ACIP Shared Clinical Decision-Making Recommendations | CDC](#)
- [Meningococcal Vaccination | CDC](#)
 - [Meningococcal Vaccine Recommendations | CDC](#)
 - [Adolescent Meningococcal Vaccination: For Providers | CDC](#)
 - [Meningococcal Vaccination: What Everyone Should Know | CDC](#)
 - [Meningococcal Vaccine Administration | CDC](#)
- [About Meningitis B — Meningitis B Action Project](#)
 - [Edu Graphics — Meningitis B Action Project](#)
 - [MenB Student Hub — Meningitis B Action Project](#)
 - [Meningitis B Action Project](#)
- [Vaccines \(immunize.org\)](#)
 - [Meningococcal ACWY Vaccine: Educational Materials for Patients and Healthcare Professionals \(immunize.org\)](#)
 - [Meningococcal ACWY Vaccine Recommendations by Age and Risk Factor \(immunize.org\)](#)
 - [Meningococcal B Vaccine: Educational Materials for Patients and Healthcare Professionals \(immunize.org\)](#)
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 - [Meningococcal B Vaccine: IAC Answers Your Questions \(immunize.org\)](#)

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www.ImmunizeME.org

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- Ph- 207-287-3746

