

MOLINA HEALTHCARE OF WASHINGTON

IMMUNIZATION CLINICAL PRACTICE GUIDELINES

Molina Healthcare of Washington has revised its Immunization Clinical Practice Guidelines. These guidelines are based on the Centers for Disease Control and Prevention recommendations as finalized by the Advisory Committee on Immunization Practices in 2013. The guideline was reviewed and adopted by the Molina Healthcare of Washington Clinical Quality Improvement Committee on June 26, 2002, September 25, 2007, June 25, 2009, September 22, 2011, and November 15, 2013. Review the Clinical Practice Guideline using the following links: http://www.cdc.gov/vaccines/schedules/downloads/child/mmwr-0-18yrs-catchup-schedule.pdf; and http://www.cdc.gov/vaccines/schedules/downloads/child/mmwr-0-18yrs-catchup-schedule.pdf; and http://www.cdc.gov/vaccines/schedules/downloads/adult/mmwr-0-18yrs-catchup-schedule.pdf.

2013 Important Points on Immunization Guideline

- The immunization recommendations reflects the Centers for Disease Control and Prevention recommended schedules for adults aged 19 years of age and older and for persons 0 through 18 years of age.
- Tdap (Tetanus, Diptheria and Acellular Pertussis) vaccination recommendations have been expanded to include one routine vaccination for all adults aged 65 years and older with continued Td boosters every 10 years. The Tdap vaccination is also now recommended for pregnant women during each pregnancy between 27 and 36 weeks gestation) regardless of the interval since prior Td/Tdap.
- Hepatitis A vaccination is now recommended for persons with history of illicit drug use. The Hepatitis A vaccination is no longer contraindicated during pregnancy since it is an inactivated vaccine like Hepatitis B. Thus, it's recommended in pregnant women at high risk for infection.
- Measles, Mumps, Rubella (MMR) diagnosis is no longer considered acceptable as evidence of immunity, unlike in the past when a diagnosis of measles or mumps (but not rubella) was considered to have immunity.
- Zoster vaccination is now recommended for all adults beginning at age 60, with and without underlying health problems.
- Information is added about the use of pneumococcal vaccinations (PCV13, 13 valent pneumococcal polysaccharide vaccine) and the timing of administration of this vaccine to the PPSV23 (23 valent pneumococcal polysaccharide vaccine) in adults. PCV13 is now recommended for all adults aged 19 and older with certain medical conditions (chronic renal failure, asplenia, CSF leak, cochlear implants). The schedule clarifies which adults need 1 or 2 doses before age 65 and what to do if vaccination status is unknown.
- Information is provided on the LAIV (live attenuated influenza vaccine) which is composed of 4 vaccine virus strands (one influenza A (H3N2), one influenza A (H1N1), and 2 influenza B vaccine strains).
- Several new references and links to additional information have been added including one for travel vaccine requirements and recommendations.