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Immunization Works July 2020

July 29, 2020: Content on this page kept for historical reasons.



Top Stories

National Immunization Awareness Month (NIAM) Toolkits: August is National Immunization Awareness Month. CDC has updated the NIAM [digital communication toolkits](#) with resources for partners, including:

- Key messages
- Social media content
- Social media graphics
- Newsletter announcements
- Links to educational resources for health care professionals and the public

We encourage you to share these messages and resources throughout the month of August using the hashtag **#ivax2protect**.

Vaccines and Pregnancy: Top 7 Things You Need to Know: CDC has updated its list of the [top 7 things](#) women need to know about Tdap and flu vaccines during pregnancy. We encourage you to share these tips via your newsletters and social media channels during NIAM and influenza season.

Mass Vaccination Clinic Guidance: CDC has issued revised [Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations](#). The purpose of the guidance is to assist with jurisdictional planning and implementation of satellite, temporary, or off-site vaccination clinics by public and private vaccination organizations.

The guidance is broken down into four categories:

- [Planning activities](#)
- [Pre-clinic activities](#)
- [During the clinic activities](#)
- [Post-clinic activities](#)

The guidance also provides information on additional considerations that are required during the COVID-19 pandemic, including physical distancing, personal protective equipment (PPE), and enhanced sanitation efforts.

Vaccine Information Statements (VISs): The [hepatitis A](#) VIS (interim) has been updated and we encourage providers to begin using the VIS immediately. For more information please visit the [VIS website](#).

Maintaining Childhood Immunizations and Well-Child Care During the COVID-19 Pandemic: Stay-at-home and shelter-in-place orders have resulted in declines in outpatient pediatric visits and [fewer vaccine doses being administered](#), leaving children at risk for vaccine-preventable diseases. As states develop plans for reopening, health care providers are encouraged to work with families to keep or bring children up to date with their vaccinations. Primary care practices in communities affected by COVID-19 should continue to use strategies to separate well visits from sick visits. Examples include:



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• Collaborating with health care providers in the community to identify separate locations for providing well visits for children

Health care providers should identify children who have missed well-child visits and/or recommended vaccinations and contact parents to schedule in-person appointments, starting with newborns, infants up to 24 months, and young children and extending through adolescence. State-based immunization information systems and electronic health records may be able to support this work.

All newborns should be seen by a pediatric health care provider shortly after hospital discharge (3 to 5 days of age). Ideally, newborn visits should be done in person during the COVID-19 pandemic to evaluate infants for dehydration and jaundice, ensure all components of newborn screening were completed and appropriate confirmatory testing and follow-up are arranged, and evaluate mothers for postpartum depression. Developmental surveillance and early childhood screenings, including developmental and autism screening, should continue, along with referrals for [early intervention services](#) and further evaluation if concerns are identified. Please visit the [COVID-19 web page](#) for additional information.

Immunization Guidance During COVID-19: The COVID-19 pandemic has caused health care providers to change how they operate to continue providing essential services to patients. Ensuring that immunization services are maintained or reinitiated is essential for protecting individuals and communities from vaccine-preventable diseases and outbreaks and reducing the burden of respiratory illness during the upcoming influenza season.

CDC has issued "[Interim Guidance for Immunization Services During the COVID-19 Pandemic](#)" to help immunization providers in a variety of clinical settings plan for the safe administration of vaccines during the COVID-19 pandemic. This guidance will be updated as the COVID-19 pandemic evolves.

Highlights include:

- Considerations for routine administrations of all recommended vaccines for children, adolescents, and adults, including pregnant women
- General practices for the safe delivery of vaccination services, including considerations for alternative vaccination sites
- Strategies for catch-up vaccinations

We encourage you to share this guidance widely.

Resources for Encouraging Vaccinations During the COVID-19 Pandemic: NCIRD has created a new [web page for partners](#) that features communication resources to encourage parents to keep children up to date on routine vaccines during the COVID-19 pandemic. These resources include a web article, social media content, and social media graphics. Please consider sharing these resources on your social media platforms, newsletters, or other digital communication channels.

MMWR

Provision of Pediatric Immunization Services During the COVID-19 Pandemic: An Assessment of Capacity Among Pediatric Immunization Providers Participating in the Vaccines for Children Program in the U.S., May 2020: Recent reports suggest that routine childhood vaccination coverage might have decreased during the COVID-19 pandemic. To assess the capacity of pediatric health care practices to provide immunization services to children during the pandemic, a survey of practices participating in the Vaccines for Children (VFC) program was conducted during May 12–20, 2020. Data were weighted to account for the sampling design; thus, all percentages reported are weighted. Among 1,933 responding practices, 1,727 (89.8%) were currently open; 1,397 (81.1%) of these reported offering immunization services to all of their patients. When asked whether the practice would likely be able to accommodate new patients to assist with provision of immunization services through August, 1,135 (59.1%) respondents answered affirmatively. These results suggest that health care providers appear to have the capacity to deliver routinely recommended childhood vaccines, allowing children to catch up on vaccines that might have been delayed as a result of COVID-19 related effects on the provision of or demand for routine well child care. Health care providers and immunization programs should educate parents on the need to return for well-child and



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Update on Immunodeficiency-Associated Vaccine-Derived Polioviruses—Worldwide, July 2018–December 2019. Since establishment of the Global Polio Eradication Initiative in 1988, polio cases have declined more than 99.9% worldwide; extensive use of live, attenuated oral poliovirus vaccine (OPV) in routine childhood immunization programs and mass campaigns has led to eradication of two of the three wild poliovirus (WPV) serotypes (types 2 and 3). Despite its safety record, OPV can lead to rare emergence of vaccine-derived polioviruses (VDPVs) when there is prolonged circulation or replication of the vaccine virus. In areas with inadequate OPV coverage, circulating VDPVs (cVDPVs) that have reverted to neurovirulence can cause outbreaks of paralytic polio. Immunodeficiency-associated VDPVs (iVDPVs) are isolated from persons with primary immunodeficiency (PID). Infection with iVDPV can progress to paralysis or death of patients with PID, and excretion risks seeding cVDPV outbreaks; both risks might be reduced through antiviral treatment, which is currently under development. The [July 17 MMWR](#) updates previous reports and includes details of iVDPV cases detected during July 2018–December 2019. During this time, 16 new iVDPV cases were reported from five countries (Argentina, Egypt, Iran, Philippines, and Tunisia). Alongside acute flaccid paralysis (AFP) surveillance, surveillance for poliovirus infections among patients with PID has identified an increased number of persons excreting iVDPVs. Expansion of PID surveillance will facilitate early detection and follow-up of iVDPV excretion among patients with PID to mitigate the risk for iVDPV spread. This will be critical to help identify all poliovirus excretors and, thus, achieve and maintain eradication of all polioviruses.

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Influenza

What You Need to Know for the 2020–21 Influenza Season: CDC and ACIP continue to recommend that everyone 6 months and older receive an annual flu vaccine. For the 2020–21 flu season, providers may choose to administer any licensed, age-appropriate flu vaccine (IIV, RIV4, or LAIV4), with no preference for any one vaccine over another. For the 2020–21 flu season, there are changes to the composition of flu vaccines.

- The egg-based H1N1 vaccine component was updated from an A/Brisbane/02/2018 A(H1N1)pdm09-like virus to an A/Guangdong-Maonan/SWL1536/2019 A(H1N1)pdm09-like virus.
- The cell- or recombinant-based H1N1 vaccine component was updated from an A/Brisbane/02/2018 A(H1N1)pdm09-like virus to an A/Hawaii/70/2019 A(H1N1)pdm09-like virus.
- The egg-based H3N2 vaccine component was updated from an A/Kansas/14/2017 A(H3N2)-like virus to an A/Hong Kong/2671/2019 A(H3N2)-like virus.
- The cell- or recombinant-based H3N2 vaccine component was updated from an A/Kansas/14/2017 A(H3N2)-like virus to an A/Hong Kong/45/2019 A(H3N2)-like virus.
- The B/Victoria lineage vaccine component was updated from a B/Colorado/06/2017 (B/Victoria lineage)-like virus to a B/Washington/02/2019 (B/Victoria lineage)-like virus.
- The B/Yamagata lineage vaccine component was not updated and it remains a B/Phuket/3073/2013 (B/Yamagata lineage)-like virus.

Additionally, there are changes to two previously licensed vaccines:

- High-dose flu vaccines licensed for use in adults 65 years and older will now all be quadrivalent, replacing the previously licensed trivalent high-dose vaccine with one containing a second B virus component.
- Adjuvanted flu vaccine licensed for use in adults 65 years and older will now be quadrivalent, too, with an additional B virus component added to those vaccines.

Getting a flu vaccine this fall will be more important than ever, not only to reduce the risk from flu and its potentially serious complications, but also to help conserve health care resources and reduce the burden of flu on the health care system during the COVID-19 pandemic.

For more information on the upcoming 2020–21 flu season, visit the [flu FAQ web page](#).

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Epidemiology and Prevention of Vaccine-Preventable Diseases (the Pink Book) 2020 video series. CDC is offering a series of weekly one-hour web-on-demand videos that will provide an overview of vaccination principles, general best practices, immunization strategies, and specific information about vaccine-preventable diseases and the vaccines that prevent them. Each video will include updated information from recent Advisory Committee on Immunization Practices (ACIP) meetings and votes. The series started on July 1, 2020, and a new video will be released most Wednesdays through October 14, 2020. This year, because of limited staff availability during the ongoing COVID-19 response, the videos will be prerecorded rather than live webinars. Visit the [Pink Book video series page](#) for the schedule and additional information. Continuing Education (CE) will be available for each video.

Pediatrics Perspectives: An article in [Pediatrics Perspectives](#) titled “A Call to Action: Strengthening Vaccine Confidence in the United States,” has been published online. In 2000, measles was declared eliminated in the U.S.; however, sustained transmission for almost 12 months (2018–2019), nearly led to the loss of the U.S.’s elimination status. A significant contributor to this was widespread vaccine hesitancy—the delay in acceptance or the refusal of vaccination despite availability of vaccination services. To protect our nation’s health, we must empower families in all communities and across generations, to feel confident in the decision to vaccinate. The prevalence of misinformation presents continued challenges. CDC’s [Vaccinate with Confidence](#) framework encourages communities and organizations at all levels to focus on protecting communities, empowering families, and stopping myths to increase vaccination coverage and prevent vaccine-preventable diseases.

Vaccine Administration e-Learn: An [e-Learn on vaccine administration](#) is now available. Proper vaccine administration is critical for ensuring that vaccines are both safe and effective. Vaccine administration errors happen more often than you might think. Of the average 36,000 reports received annually by the [Vaccine Adverse Event Reporting System \(VAERS\)](#), about 1,500 are directly related to administration error. Some of the most common vaccine administration errors include:

- Not following the recommended immunization schedule
- Administering improperly stored or expired vaccine and/or diluent
- Administering the wrong vaccine—confusing look-alike or sound-alike vaccines such as DTaP/Tdap or administering products outside age indications

The e-Learn is a free, interactive, online educational program that serves as a useful introductory course or a great refresher on vaccine administration. The self-paced e-Learn provides comprehensive training, using videos, job aids, and other resources to accommodate a variety of learning styles. A certificate of completion and/or Continuing Education (CE) is available for those that complete the training.

“Keys to Storing and Handling Your Vaccine Supply” Video: Two of the most important safeguards for the nation’s vaccine supply are proper vaccine storage and handling. An updated [web-on-demand video](#), titled “Keys to Storing and Handling Your Vaccine Supply,” is designed to decrease vaccine storage and handling errors by demonstrating recommended best practices and addressing frequently asked questions. Continuing Education (CE) is available.

Vaccine Storage and Handling Toolkit: The [Vaccine Storage and Handling Toolkit](#) is a comprehensive guide that describes best practices for vaccine storage and handling from ACIP recommendations, product information from vaccine manufacturers, and scientific studies.

Current Issues in Immunization Webinars: The next Current Issues in Immunization webinar on August 4, 2020, will focus on maintaining routine vaccination and preparing for influenza vaccination during the COVID-19 pandemic. Current Issues in Immunization webinars, held several times during the year, are designed to provide clinicians with the most up-to-date information on immunizations. The webinars are live, one-hour events combining an **online visual presentation** with **simultaneous audio** via telephone conference call, along with a live **question-and-answer** session. Registration, Internet access, and a separate phone line are needed to participate. View the [webinar web page](#) for additional information and the archived webinars.



You Call the Shots Modules: *You Call the Shots* is a series of interactive, web-based training courses developed through the Project to Enhance Immunization Content in Nursing Education and Training. These courses are ideal for medical or nursing students, new vaccination providers, or seasoned health care providers seeking a review. The “[Rotavirus](#),” “[DTaP](#),” and “[Tdap](#)” modules have recently been updated. Please visit the [You Call the Shots web page](#) to view all the modules. Continuing




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[vaccines for children \(VFC\) Program Fact Sheet and Feature Article](#). Parents may not be aware that their children are eligible for free vaccines through the VFC program. This updated [one-page handout](#)  for parents of children age 0–18 years is easy to print and share. The handout is also available in [Spanish](#) . CDC has also updated its [VFC feature article](#). Please consider sharing these materials via your social media channels.

Redesigned HPV Vaccine Website for Health Care Professionals: As part of its effort to optimize digital content for use on multiple devices, CDC has redesigned the [HPV vaccine website for health care professionals](#). The new website includes HPV cancer statistics, continuing education resources, tips for answering parents’ questions, and more. It also features a new page on HPV vaccine safety and effectiveness data, which outlines the key data that health care professionals need to know as they address questions from parents. Please share this new resource with colleagues or members of your health care professional association.

CDC and Medscape: This special [series of commentaries](#) , part of a collaboration between CDC and Medscape, is designed to deliver CDC’s authoritative guidance directly to Medscape’s physicians, nurses, pharmacists, and other health care providers. In this series, CDC experts offer video commentaries on current topics important to practicing clinicians. NCIRD has contributed to a variety of commentaries. You will need to sign up and log in as a member to view the commentaries and registration is free.

Immunization Resources: Various publications are available for ordering at [CDC-INFO On Demand](#). You can search for immunization publications by using the “Programs” drop-down menu and selecting “Immunization and Vaccines,” or you can search by “Title.” Free hard copies of the 2020 [recommended immunization schedules](#) are now available for ordering.

CDC Job Openings: CDC is committed to recruiting and hiring qualified candidates for a wide range of immunization and other positions. Researchers, medical officers, epidemiologists, and other specialists are often needed to fill positions within CDC. For a current listing, including international opportunities, please visit [CDC’s employment web page](#).

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Calendar of Events

[ACIP Meeting](#), October 28–29, 2020, Atlanta, GA

[NCIRD Calendar of Events](#)

[Immunization Action Coalition \(IAC\) Calendar](#) 

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