Adult Immunizations

| Recommended Immunizations For Health Care Personnel (HCP) | | | |
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| Vaccine | Recommendations in Brief | | |
| Influenza | 1 dose of TIV IM or LAIV intranasally every flu season. | | |
| Tdap/Td (Tetanus, diphtheria, pertussis) | 1 dose of Tdap as soon as possible, then Td boosters every 10 years. | | |
| MMR (Measles, mumps, rubella) | 2 doses of MMR, \geq 28 days apart, or documented laboratory-confirmed immunity to measles and mumps and rubella. | | |
| Varicella | 2 doses of varicella vaccine, or serologic proof of immunity, or history of varicella disease | | |
| Hepatitis B | 3-dose series (dose #1 now, #2 1 month later, and #3 approximately 5 months after #2). | | |
| Meningococcal | 1 dose of quadrivalent meningococcal vaccine for microbiologists who are routinely exposed to <i>N. meningitidis</i> isolates. | | |

Massachusetts Recommendations and Requirements for 2012

Health care personnel (HCP) include full- and parttime staff with or without direct patient contact, including physicians, students and volunteers who work in inpatient, outpatient and home-care settings. See Immunization of Health-Care Personnel -Recommendations of the ACIP. www.cdc.gov/mmwr/pdf/rr/rr6007.pdf

Influenza: All HCP should receive annual flu vaccine. Give trivalent inactivated flu vaccine (TIV) to any HCP. Give live, attenuated influenza vaccine (LAIV) to non-pregnant healthy HCP \leq 49 years of age. TIV is preferred over LAIV for HCP in close contact with severely immunosuppressed persons when patients require a protective environment.

Tetanus/Diphtheria/Pertussis (Td/Tdap): All HCP, regardless of age, should receive a single dose of Tdap as soon as feasible if they have not previously received Tdap, and regardless of the time since last Td dose.

Measles, Mumps, Rubella (MMR): All HCP should be immune to measles, mumps, and rubella. Documentation of immunity: a) 2 doses of MMR on or after the 1st birthday, and at least 1 month apart; or b) laboratory evidence of immunity to measles **and** mumps **and** rubella (Consider HCP with "indeterminate" or "equivocal" immunity as susceptible).. **Varicella:** All HCP should be immune to varicella. Evidence of immunity to varicella for HCP include: written documentation with 2 doses of vaccine; laboratory evidence of immunity or laboratory confirmation of disease; diagnosis of history of varicella disease by health-care provider, or diagnosis of history of herpes zoster by health-care provider (including school or occupational health nurse).

Hepatitis B: HCP should receive 3 doses hepatitis B vaccine at 0, 1, and 6 months. Test for hepatitis B surface antibody (anti-HBs) 1–2 months after 3rd dose to document immunity. HCP and trainees in certain populations at high risk for chronic hepatitis B (e.g., those born in countries with high and intermediate endemicity) should be tested for HBsAg and anti-HBc/anti-HBs to determine infection status prior to vaccination.

Meningococcal: Quadrivalent meningococcal vaccine (MCV4 or MenACY-CRM) (IM) is recommended for microbiologists \leq 55 years old who are routinely exposed to *N. meningitidis* isolates. MPSV (SC) is recommended for those > age 55 years. Those who remain at high risk should be revaccinated every 5 years.

These guidelines are based on the recommendations of the Advisory Committee on Immunization Practices (ACIP). For specific ACIP recommendations, refer to the full statements at <u>www.cdc.gov/vaccines/recs/acip</u>. You can also visit the MDPH website at <u>www.mass.gov/dph/imm</u> or call MDPH toll-free at 1-888-658-2850.

| Recommended Immunizations For Teachers and Day Care Staff ¹ | | | | |
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| Vaccine | Recommendation | | | |
| MMR ² (Measles, Mumps, Rubella) | 2 doses of MMR, 4 weeks apart, for adults born \geq 1957. 1 dose for adults born outside of the U.S. <1957. Adults born in the U.S. < 1957 are considered immune. | | | |
| Varicella ³ | 2 doses of varicella vaccine, 4 weeks apart, for adults born in the U.S. ≥1980, or born outside the U.S. regardless of year of birth. Adults born < 1980 are considered immune | | | |
| Hepatitis B ⁴ | 3 doses | | | |
| Td/Tdap ⁵ (Tetanus, diphtheria, pertussis) | 1 dose of Tdap, then Td booster every 10 years. | | | |
| Annual Influenza | Annual influenza vaccine for everyone 6 months of age and older. | | | |

¹ All full- and part-time teachers, student teachers, and staff.

² Proof of immunity to measles, mumps **and** rubella is required for staff of licensed group and family day care centers (see table below). MMR vaccine is recommended for teachers and staff in other school settings. ⁴ Federal OSHA regulations require some employers to offer hepatitis B vaccine to childcare staff whose responsibilities include first aid. Serologic evidence of immunity may be substituted for immunization.

³ Proof of immunity to varicella includes documentation of 2 doses of varicella-containing vaccine; a reliable history of varicella disease (physician diagnosis; or personal recall) or serologic evidence of immunity. ⁵ All adults should receive a single dose of Tdap, especially those who have close contact with infants <12 months of age (e.g., day care staff). There is no minimum interval between Tdap and a previous dose of Td.

| Massachusetts Immunization Requirements for Select Occupational Groups ^{1,2} | | | |
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| Group and Regulation | Requirement | Vaccination/Proof of Immunity | |
| Health care personnel assigned to maternal- newborn areas (105 CMR 130.626) (Circular letter : DHQ 11-90-300) | Immunity to measles and rubella | At least one dose of vaccine on or after 12 months of age; serologic evidence of immunity to rubella and measles. DPH no longer accepts physician-diagnosed disease as acceptable proof of immunity. | |
| Employees of licensed health care facilities (105 CMR 130.325; 105 CMR 140.150; 105 CMR 150.002 (D)(8) | Annual influenza vaccination | Licensed health care facilities shall offer influenza vaccine at no cost to all employees and ensure that an employee who declines vaccination signs a statement declining vaccination and affirming that s/he received information about the risks and benefits of vaccination. | |
| Staff of licensed group and family day cares and programs for school age children | Immunity to measles, mumps and rubella | Those born in or after 1957, regardless of country of birth: 2 doses of MMR (or 2 doses of measles-containing vaccine) and 1 dose each of mumps and rubella vaccine at \geq 12 months of age; or serologic evidence of immunity to measles, mumps <u>and</u> rubella. | |
| [606 CMR 7.09(11)] | | Those born before 1957 in the U.S. are considered immune. | |
| | | Those born before 1957 in countries other than the U.S.: 1 dose of MMR; or serologic evidence of immunity to measles, mumps <u>and</u> rubella. | |
| | | Physician-diagnosed disease is not acceptable proof of immunity. | |
| Camp staff age 18 years and older [CMR 430.152 (B)] | Immunity to measles, mumps and rubella; tetanus/diphtheria vaccine | If born before 1957, at least 1 dose of MMR on or after 12 months of age; serologic evidence of immunity to measles, mumps and rubella. At least 3 doses of DTaP/DTP/DT/Td. A booster of Td or Tdap is required if 10 or more years since last tetanus vaccine. | |

¹Massachusetts Immunization Requirements for College: <u>www.mass.gov/eohhs/docs/dph/cdc/immunization/guidelines-maschool-requirements.pdf</u>

²Federal Occupational Safety and Health Administration (OSHA) regulations may include other immunization requirements for workers in certain occupational settings.

Information on Vaccines for Travelers: Call the CDC Travel Hotline at 877-394-8747 or visit www.cdc.gov/travel/default.aspx,