PURPOSE:
Recognizing the major impact and mortality of both influenza and pneumococcal disease on our patient populations, and the effectiveness of vaccines in preventing illness, absenteeism from work and school, hospitalization, and death, and for reducing health care costs; Cheshire Medical Center/Dartmouth-Hitchcock Keene has adopted the following policy. The policy is based on these principles:
1. Staff and volunteers of our facility, regardless of age and medical condition, should be vaccinated with influenza vaccine annually, unless there is documented contraindication.
2. Patients over the age of six months of age should receive influenza vaccine annually unless there is a documented contraindication.
3. Patients age 6-64 years of age with certain co-morbidities and all patients over the age of 65 years of age should receive Pneumococcal vaccine (PPSV23) unless there is a documented contraindication.

GUIDELINES:
Flu Vaccine: Beginning each year on October 1 (or when vaccine is available) and going through March 31 (unless vaccine is unavailable sooner), in-patients over age six months of age admitted to Cheshire Medical Center and ambulatory care patients will be screened for influenza vaccine. Vaccine will be offered unless there is documentation of previous immunization for that current flu season or the patient has a documented contraindication.
NOTE: Influenza vaccine is contraindicated if: patient has documentation of allergy/sensitivity to influenza vaccine, patient has documented anaphylactic allergy to eggs or patient has had Guillain-Barre syndrome within 6 weeks after a previous influenza vaccine.

Pneumococcal Vaccine:
- **Patients ≥ 6 to 17 years old** who have diabetes mellitus, nephrotic syndrome, end stage renal disease, congestive heart failure, HIV/AIDS, sickle cell disease, damaged spleen or no spleen, or chronic obstructive pulmonary disease, will be screened for the pneumococcal polysaccharide vaccine (PPV23)
- **Patients 18-64 yrs old** who have diabetes mellitus, nephrotic syndrome, end stage renal disease, congestive heart failure, HIV/AIDS, sickle cell disease, damaged spleen or no spleen, chronic obstructive pulmonary disease, asthma, alcoholism or cirrhosis, lymphoma, leukemia, Hodgkin's disease, multiple myeloma, organ transplant, leaks in cerebrospinal fluid or cochlear implant, long term steroid use, or current history of smoking, will be screened for pneumococcal polysaccharide vaccine (PPV23)
- **Patients 18-64 yrs old** who have damaged spleen or no spleen, sickle-cell disease, HIV/AIDS, leukemia, lymphoma, multiple myeloma, nephrotic syndrome, organ or bone marrow transplant, long- term steroid use, should be offered a 2nd dose of pneumovax (5 or more years after first vaccine)
- **ALL patients over 65** should be assessed for one pneumovax.
  - If patient received one pneumovax prior to age 65 and five years has passed; they should be offered another vaccine.
  - Vaccine should not be administered if patient already received two vaccines prior to age 65.
NOTE: Pneumococcal vaccine (PPSV23) is contraindicated if patient has fever > 100.4; administer when patient is afebrile, patient is pregnant, patient had bone marrow transplant within past 12 months (not likely to be effective), patient is currently receiving chemotherapy or radiation, or received within last 2 weeks (not likely to be effective) or patient is 6 years of age who received Prevnar vaccine within previous 8 weeks.

These vaccines may be administered by any appropriately qualified personnel who are following protocol without the need for an individual physician evaluation or order. All immunizations will be documented in the medical record.
Recommendations for Pneumococcal Polysaccharide Vaccine

Patients over 65 years old and patients with underlying medical conditions should be assessed for and offered pneumococcal polysaccharide vaccine "pneumovax". Pneumococcal polysaccharide vaccine (PPSV23) protects against 23 types of pneumococcal bacteria, including those most likely to cause serious disease.

1. **Children 6-17 yrs old with the following conditions should be assessed for ONE pneumovax**
   *note: use state vaccine*
   - Diabetes mellitus
   - Nephrotic syndrome
   - End Stage Renal Disease
   - Sickle cell disease
   - Damaged spleen or no spleen
   - HIV/AIDS
   - Congestive Heart Failure
   - Chronic Obstructive Pulmonary Disease

2. **Patients 18-64 yrs old with the following conditions who should be assessed for pneumovax**
   NOTE: If patient already received pneumovax in the past see #3
   *note: if pt under 19, use state vaccine*
   - Patients who smoke
   - damaged spleen or no spleen
   - history of heart disease
   - history of kidney disease
   - history of lung disease, including asthma
   - sickle cell disease
   - diabetes
   - alcoholism and/or cirrhosis
   - leaks of cerebrospinal fluid or cochlear implant
   - nephrotic syndrome
   - HIV/AIDS
   - long term steroid use

3. **Patients 18-64 yrs old with the following conditions should be offered a 2nd dose of pneumovax**
   (5 or more years after 1st vaccine)
   - damaged spleen or no spleen
   - sickle-cell disease
   - cancer, leukemia, lymphoma, multiple myeloma
   - taking medication that lowers immunity (such as chemotherapy or long-term steroids)
   - nephrotic syndrome
   - organ or bone marrow transplant
   - HIV/AIDS

4. **ALL patients over 65 should be assessed for pneumovax**
   NOTE:
   - If patient is 65 years old or older and has not received a pneumovax in the past, offer vaccine.
   - If patient already received one pneumovax AFTER age 65; DO NOT RE-VACCINATE
   - If patient received ONE pneumovax prior to age 65 and five years has passed; RE-VACCINATE
   - If patient received TWO vaccines prior to age 65; DO NOT RE-VACCINATE

**NOTE:** Patients should NOT receive more than 2 pneumococcal vaccines in a LIFETIME.

**NOTE:** Vaccine is contraindicated if
- patient has fever > 100.4; wait until patient is afebrile
- patient is pregnant
- patient had bone marrow transplant within past 12 months (not likely to be effective)
- patient is currently receiving chemotherapy or radiation or received within last 2 weeks (not likely to be effective)
- patient 6 years of age who received a Prevnar within previous 8 weeks