



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND
2050 WORTH ROAD
FORT SAM HOUSTON, TEXAS 78234-6000

MCPO-PM

26 MAY 2006

MEMORANDUM FOR Commanders, MEDCOM Regional Medical Commands

SUBJECT: New Immunization Recommendations

1. The Advisory Committee on Immunization Practices (ACIP) recently approved several recommendations. Army policy is to expeditiously adopt these recommendations in clinical practice in our hospitals and clinics:

- a. immunization of health-care workers (HCWs) against pertussis
- b. expanded influenza immunization in children
- c. reinforced recommendations for influenza immunization of HCWs
- d. immunization of infants with a live, oral, pentavalent rotavirus vaccine

2. Tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine adsorbed (Tdap; Adacel™ manufactured by Sanofi Pasteur, or Boostrix® manufactured by GlaxoSmithKline) is recommended to protect HCWs from pertussis and to reduce transmission in health-care facilities. Healthcare workers in hospitals or ambulatory care settings who have direct patient contact (hands-on or face-to-face contact) should receive a single dose of Tdap as soon as feasible, at an interval as short as 2 years from the last dose of tetanus and diphtheria toxoids adsorbed (Td). Priority should be given to immunization of personnel who have direct contact with infants less than 12 months of age. Adacel™ is licensed for active booster immunization against tetanus, diphtheria and pertussis in people 11 to 64 years old. Boostrix® however, is only licensed for use in people 10 to 18 years old. See ACIP adolescent recommendations, see www.cdc.gov/mmwr/PDF/rr/rr5503.pdf.

3. Influenza immunization is now recommended for all children 6 months to 59 months old (up to 5 years of age). The previous recommendation included only children 6 to 23 months old. The committee similarly recommended expanding routine immunization for household contacts (anyone who spends a significant amount of time in the home) and out-of-home caregivers of children 24 to 59 months old. All children less than 9 years old who have not previously been vaccinated should receive two doses of influenza vaccine 1 month apart to maximize the likelihood of a satisfactory protective antibody response.

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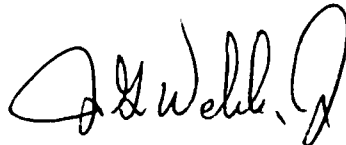
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4. The ACIP and Healthcare Infection Control Practices Advisory Committee (HICPAC) recently published recommendations for influenza immunization of health-care personnel (see www.cdc.gov/mmwr/PDF/rr/rr5502.pdf). The ACIP and HICPAC recommend education of all HCWs regarding the benefits of influenza immunization and the potential consequences of influenza illness for themselves and their patients; offering influenza immunization to all eligible HCWs at no cost; obtaining a signed declination from HCWs who decline immunization for reasons other than a medical contraindication; and use of HCW influenza immunization coverage as a measure of a patient safety quality program.

5. A live, oral, pentavalent rotavirus vaccine (RotaTeq® manufactured by Merck), is now recommended for infants to prevent rotavirus infection. This is the leading cause of acute severe diarrhea, vomiting, fever and dehydration (gastroenteritis) in infants and young children. The ACIP recommends that infants receive three doses at two, four, and six months of age. Infants should receive the first dose by 12 weeks of age and should receive all doses of the vaccine by 32 weeks of age. Premature infants should be immunized according to age post-delivery versus gestational age.

6. Product labeling, Vaccine Information Statements (VISs), and additional disease information is available at www.vaccines.mil.

7. Points of contact for this memorandum are COL John Grabenstein, DSN 761-5101, commercial (703) 681-5101, john.grabenstein@otsg.amedd.army.mil; and COL John Rowe, DSN 761-0022, commercial (703) 681-0022, john.rowe@otsg.amedd.army.mil.



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