## INFORMATION PAPER

Military Vaccine Agency 29 August 2012

SUBJECT: Immunization Recommendations for Disaster Response Operations within the United States

1. Purpose. To provide immunization recommendations for Department of Defense (DoD) personnel supporting disaster response after hurricanes or other natural disasters.

## 2. Facts.

- a. Routine Adult. Ensure all personnel are current for all routine adult vaccinations based on age and health status. Do not delay deployment pending completion of immunization series.
- b. Hepatitis A. Personnel will begin or complete the two-dose Hepatitis A vaccine series. If a dose is needed to complete the 0, 6 month schedule, administer it now. This series may be completed using the monovalent or bivalent vaccine. Further guidance on completing the vaccinations series is available
- at: <a href="http://www.vaccines.mil/documents/1504MIP-Hep%20A-B%20Counting%20doses.">http://www.vaccines.mil/documents/1504MIP-Hep%20A-B%20Counting%20doses.</a>
- c. Hepatitis B. Personnel will begin or complete the three-dose Hepatitis B vaccine series. If a dose is needed to complete the 0, 1, 6 month schedule, administer it now. This series may be completed using the monovalent or bivalent vaccine. Further guidance on completing vaccination series is available
- at: <a href="http://www.vaccines.mil/documents/1504MIP-Hep%20A-B%20Counting%20doses.pdf">http://www.vaccines.mil/documents/1504MIP-Hep%20A-B%20Counting%20doses.pdf</a>
- d. Influenza. Vaccinate personnel with the current seasonal influenza vaccine if available.
- e. Tetanus-diphtheria-acellular pertussis (Tdap). Personnel must have at least one dose of Tdap within last 10 years. Administer Tdap regardless of the interval since last tetanus or diphtheria-toxoid containing vaccine. Consistent with Centers for Disease Control & Prevention (CDC) wound-management guidelines, anyone who develops a puncture wound or has a wound contaminated with dirt, feces, soil, or saliva needs a Td booster (or Tdap if applicable) if the most recent dose was more than 5 years earlier.
- f. Rabies. Veterinarians and people involved in animal-control efforts should assess the localized risk of rabies exposure and consider their need for pre-exposure prophylaxis. Persons who are exposed to potentially rabid animals should be evaluated and receive standard post-exposure prophylaxis, as clinically appropriate.

## 3. References.

a. Centers for Disease Control and Prevention. Updated Recommendations for

Military Vaccine Agency

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Use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis (Tdap) Vaccine from the Advisory Committee on Immunization Practices, MMWR 2011; 60(01):

[13-15]. <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6001a4.htm?s\_cid=mm600">http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6001a4.htm?s\_cid=mm600</a> 1a4 w

- b. Centers for Disease Control and Prevention. Preventing Tetanus, Diphtheria, and Pertussis among Adults: Use of Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine: Recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2006; 55 (No. RR-17): [1-37]. <a href="http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5517a1.htm">http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5517a1.htm</a>
- c. Centers for Disease Control and Prevention. Recommended Adult Immunization Schedule United States, 2012. MMWR 2012; 61(4)
- d. Military Vaccine Agency. Vaccine Recommendations Quick Reference Chart: <a href="http://www.vaccines.mil/qr/ServiceMessages">http://www.vaccines.mil/qr/ServiceMessages</a>

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