### Meningococcal (A, C, W, Y) Vaccine

| Vaccine Description | • Brands: Menveo® and MenQuadfi®  
|                    | • Inactivated, bacterial polysaccharide conjugate  
|                    | • See package insert |

| Dose & Route | • Dose: 0.5 mL  
|             | • Route: IM (Menveo® and MenQuadfi®) - (Precaution: hemophilia, thrombocytopenia, and anticoagulation therapy)  
|             | • See package insert |

| Indications | • U.S. military basic trainees  
|            | • Deploying personnel per CCMD guidance  
|            | • Children at the 11-12 year of age visit or at subsequent visit  
|            | • People who might be infected during an outbreak of certain types of meningococcal disease  
|            | • Anyone traveling to, or living in, a part of the world where meningococcal disease is common, such as sub-Saharan Africa  
|            | • Anyone who has a non-functioning spleen or whose spleen has been removed (asplenia)  
|            | • Anyone who has terminal complement component deficiency (an immune system disorder)  
|            | • Persons receiving a complement inhibitor (e.g., eulizumab; [Soliris])  
|            | • People at occupational risk  
|            | • College freshmen, especially those who live in dormitories  
|            | • People with HIV infection |

| Administration Schedule | • Single dose for most adults  
|                         | • Two doses, 2 months apart, for adults at high risk; e.g., HIV infection, asplenia, complement component deficiency, or traveling or residing in countries in which the disease is common  
|                         | • Menveo®: Single dose vial is licensed for 10-55 years, 2 vial presentation is licensed for 2mo-55 years.  
|                         | • MenQuadfi® is licensed for 2 years and older  
|                         | • Individuals 56 years or older who are recommended meningococcal vaccination can receive either meningococcal conjugate vaccine (ACIP) |

| Booster (Menveo® and MenQuadFi®) | • Menveo® and MenQuadfi®:  
|                                  | • A booster dose is recommended for people 19 through 21 years of age who are at risk (above) or first-year college students living in residence halls or a military recruit, if previous dose given before 16 years of age  
|                                  | • People with persistent risk need booster every 5 years for as long as risk is present (this includes those with risk due to travel, persistent complement component deficiency, or functional or anatomic asplenia) |

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### Contraindications
- Serious allergic reaction to prior dose or vaccine component
- Moderate or severe illness (temporary waiver)
- Menveo: severe allergic reaction to any diphtheria toxoid or CRM197 containing vaccine.
- MenQuadfi: severe allergic reaction to a tetanus toxoid-containing vaccine

### Special Considerations
- Menveo® and MenQuadfi® have not been widely studied in pregnant or lactating women and should be given only if clearly indicated.
- Persons aged ≥56 years who are recommended meningococcal vaccination because they are at increased risk for meningococcal disease can receive either MenACWY conjugate vaccine. This includes:
  - Meningococcal vaccine-naïve persons ≥56 years who require only a single dose of vaccine (e.g. travelers and persons at risk as a result of a community outbreak)
  - Persons who are recommended for revaccination or for whom multiple doses are anticipated (e.g., persons with asplenia, HIV, and microbiologists)
- **Penbraya (MenABCWY) is licensed as a 2-dose series given 6 months apart, for individuals aged 10-25 years. Pfizer’s MenABCWY vaccine may be used when both MenACWY and MenB are indicated at the same visit for:**
  - Healthy individuals age 16 through 23 years (routine schedule) when shared clinical decision-making (SCDM) favors administration of MenB vaccination (requires order from privileged provider).
  - Individuals age 10 years and older at increased risk of meningococcal disease (e.g., due to persistent complement deficiencies, complement inhibitor use, or functional or anatomic asplenia) due for both vaccines
  - The MenB component of Penbraya is the MenB vaccine Trumenba. As Trumenba and Bexsero are not interchangeable, a primary series and any future MenB booster doses must be of the same brand.
- See Storage and Handling Section

### VIS:
http://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening.html

Standing Orders: www.health.mil/standingorders

Pregnancy registry for Menactra®: 1-800-822-2463 (Sanofi Pasteur); Pregnancy registry for Menveo®: 1-877-311-8972 (Novartis); also notify DHA- IHD

Additional education may be found at www.health.mil/meningococcal