Recommendations of the West Virginia Bureau for Public Health: Immunizations for West Virginia College, University, Community and Technical School Students

Proof of Immunization or Naturally-Acquired Immunity Required Students

| Vaccine | Requirement | Recommendation | Contraindications/Precautions | Notes |
|---|--|--|--|--|
| MMR: Measles (Rubeola), Mumps, Rubella (German Measles) | Two (2) doses first dose 12 months of age or later - second dose at least 28 days after the first dose or - Laboratory/serologic evidence of immunity to each vaccine component | Required for students born in 1957 or later | Due to a theoretical risk of fetal infection, women who are pregnant or considering becoming pregnant within 1 month should not receive this vaccine. Guidelines exist for vaccination of persons with altered immunocompetence, please reference https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/immunocompetence.html | 1) Vaccinations received between 1963 – 1967 must be confirmed to have been with live (not inactivated) vaccine. 2) For students born before 1957, proof of immunity may be required if enrolled in health care curriculum. |
| Varicella: (Chicken Pox) | Two (2) doses second dose for persons 13 years of age and older must be given at least one month after the first or - Reliable history of varicella disease ("chicken pox") or - Laboratory/serologic evidence of immunity | Required for all students | 1) Due to a theoretical risk of fetal infection, women who are pregnant or considering becoming pregnant within 1 month should not receive this vaccine. 2) Guidelines exist for vaccination of persons with altered immunocompetence, please reference CDC guidelines: https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/immunocompetence.html | |
| Tetanus, Diphtheria, Pertussis: (Tdap, Td) | - Tdap booster dose within 10 years prior to matriculation. (or for Students who are unable to document a primary series of 3 doses of tetanus- containing vaccine (DTaP, DTP, or Td) | Required for all students | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Moderate or severe acute illness with or without fever History of Arthus-type hypersensitivity | Td boosters are recommended every 10 years throughout adulthood. |

West Virginia Department of Health and Human Resources Bureau for Public Health

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| Vaccinie | requirement | Recommendation | reactions after a previous dose of diphtheria-toxoid—containing or tetanus-toxoid—containing vaccine; defer vaccination until at least 10 years have elapsed since the last tetanus-toxoid—containing vaccine 4) For Tdap or DTaP: Encephalopathy-(e.g., coma, decreased level of consciousness, prolonged seizures), not attributable to another identifiable cause, within 7 days of administration of previous dose of DTP or DTaP 5) For Tdap or DTaP: Progressive or unstable neurological disorder, uncontrolled seizures, or progressive encephalopathy until a treatment regimen has been established and the condition has stabilized 6) Guillain-Barre Syndrome (GBS) <6 weeks after a previous dose of tetanus-toxoid—containing vaccine | Notes |
| Polio: Inactivated (IPV) Or Oral Poliovirus (OPV- no longer available in US) | Primary series in childhood with IPV alone, OPV alone or IPV/OPV sequentially; IPV booster only if needed for travel after age 18 years | Required for all students | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component | IPV should be mandatory for all international students and travelers to areas or countries where polios is epidemic or endemic |

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| Pneumococcal: (PCV 13) (PPSV 23) | See childhood, adolescent and adulthood recommendations | Strongly recommended for those adults with certain medical conditions as recommended by the ACIP | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component | ACIP recommendations for Adult Pneumococcal (PCV 13 and PPSV 23 vaccines): https://www.cdc.gov/pneumococcal/vaccination.html |
| Hepatitis B | - 3 dose hepatitis B series (0, 1-2, and 4-6 months) or - 3 dose combined hepatitis A and hepatitis B series (0, 1-2, and 6- 12) months) or - 2 dose hepatitis B series of Recombivax (0 and 4- 6 months, given at 11-15 years of age) or - Laboratory / serologic evidence of immunity or prior infection | Strongly recommended for all students | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Hypersensitivity to yeast | |
| Meningococcal vaccine: (MCV4) (Quadrivalent) | - 1 dose (meningococcal vaccine) or - 1 dose within 5 years prior to matriculation (meningococcal polysaccharide vaccine) | Required for all students | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Moderate or severe acute illness with or without fever | |
| Meningococcal B Vaccine: (MenB-4C - Bexsero® 2 dose series) (MenB-FHbp- Trumenba® 2 dose series) | - For Menb-4C (0-1 month) - For MenB-FHbp (0-6 months) | Category A: *Should be administered to: Persons at increased risk due to Outbreaks of serogroup B meningococcal disease Persistent | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Moderate or severe acute illness with or without fever Defer in pregnant or lactating females unless at increased risk | The two types of Meningococcal B vaccines are not interchangeable, so the same product must be used for all doses. |

| complement component deficiencies Treatment with eculizumab for hemolytic uremic syndrome for paroxysmal nocturnal hemoglobinuria Anatomic or functional asplenia | Vaccine | Requirement | Recommendation | Contraindications/Precautions | Notes |
|---|---------|-------------|---|---------------------------------------|--------|
| including sickle cell disease Laboratory workers routinely exposed to isolates of N. meningitides Category B: ** May be administered to: Adolescents and young adults 16-23 years old for short term protection (Preferred age 16-18) | Vaccine | Requirement | complement component deficiencies Treatment with eculizumab for hemolytic uremic syndrome for paroxysmal nocturnal hemoglobinuria Anatomic or functional asplenia including sickle cell disease Laboratory workers routinely exposed to isolates of N. meningitides Category B: ** May be administered to: Adolescents and young adults 16-23 years old for short term protection | Bexsero®: use caution in patient with | INOTES |
| | | | may be administered at the same time as MCV4 vaccinations but at a | | |

| Vaccine | Requirement | Recommendation | Contraindications/Precautions | Notes |
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| Influenza | Annual vaccination at the start of influenza season | Strongly recommended for all students | Severe allergic reaction (e.g., anaphylaxis) after previous dose of influenza vaccine or to vaccine component. | Refer to current ACIP recommendations for influenza immunizations: https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/flu.html |
| | | | GBS <6 weeks after a previous dose of influenza vaccine Moderate or severe acute illness with or | |
| | | | without fever Egg allergy other than hives, e.g., | |
| | | | angioedema, respiratory distress, lightheadedness, recurrent emesis; or required epinephrine or another emergency | |
| | | | medical intervention (IIV may be administered in an inpatient or outpatient | |
| | | | medical setting and under the supervision of a health care provider who is able to recognize and manage severe allergic conditions). | |
| Hepatitis A | - 2 dose hepatitis A series (0 and 6-12 months) or - 3 dose combined hepatitis A and hepatitis B series (0, 1-2, and 6- 12 months) | Strongly recommended for individuals considered to be at elevated risk | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Moderate or severe acute illness with or without fever | Individuals considered to be at high risk are persons traveling to countries/areas where hepatitis A is moderately or highly endemic, men who have sex with men, users of injectable and noninjectable drugs, persons with clotting-factor disorders, persons working with nonhuman primates, and persons with chronic liver disease. |
| Human Papillomavirus: (HPV-9) | Recommended for patients considered elevated risk ages 9-10 years Otherwise recommended at 11-12 years | Strongly recommended for all students | Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component Pregnancy | No HPV or Pap test screening is required prior to administering vaccine; routine cervical cancer screening should continue according to the most current recommendations. |
| | - 2 dose administration from 9-15 years of age (0 and 6-12 months) - 3 dose series for patients age 15- 26 years (0, 1-2, and 6 months) | | Moderate or severe acute illness with or without fever | |

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| Other Vaccines | - Other vaccines may be | | ĺ | |
| | recommended for | | | |
| | students with underlying | | | |
| | medical conditions and | | | |
| | students planning | | | |
| | international travel. | | | |
| | Students meeting these | | | |
| | criteria should consult | | | |
| | with their physicians or | | | |
| | health clinic regarding | | | |
| | additional vaccine | | | |
| | recommendations. | | | |

American College Health Association (ACHA) Guidelines: Recommendations for Institutional Prematriculation Immunizations, Oct. 2018 https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html https://www.cdc.gov/vaccines/schedules/hcp/adult.html

^{*}Category A: Recommendations made for all persons in age or risk-factor group **Category B: Recommendations made using individual clinical decision-making