

4-1-24 Weekly Clinical Update

Let's talk about Infection Prevention and Control, but let's NOT talk about Enhanced Barrier Precautions...what a confusing mess that is(!) and it goes into effect April 1st...today as this is posted! There are so many unanswered questions and potential situations. I am told "more to come", meaning there will be some clarification of the QSO letter as we all move through the survey process.

Rather, let's talk about Pneumococcal Vaccines. Last month, it became apparent that surveyors are considering PCV 20 REQUIRED even if the resident has been considered fully vaccinated in the past or at least that is how the CDC guidance is being interpreted by surveyors. So let's just go to the source...CDC itself.

<https://www.cdc.gov/vaccines/vpd/pneumo/hcp/recommendations.html#:~:text=CDC%20recommends%20routine%20administration%20of,and%2012%20through%2015%20months.>

Vaccination of Adults 65 Years or Older

Routine Recommendation

CDC recommends routine administration of pneumococcal conjugate vaccine (PCV15 or PCV20) for all adults 65 years or older who have never received any pneumococcal conjugate vaccine or whose previous vaccination history is unknown:

- If PCV15 is used, this should be followed by a dose of PPSV23 one year later. The minimum interval is 8 weeks and can be considered in adults with an immunocompromising condition†, cochlear implant, or cerebrospinal fluid leak.
- If PCV20 is used, a dose of PPSV23 is NOT indicated.
- See [Pneumococcal Vaccination: Summary of Who and When to Vaccinate](#) for CDC guidance on vaccination options for adults who have previously received a pneumococcal conjugate vaccine.

Footnote

† Immunocompromising conditions include chronic renal failure or nephrotic syndrome; congenital or acquired asplenia or splenic dysfunction; congenital or acquired immunodeficiencies; diseases or conditions treated with immunosuppressive drugs or radiation therapy, including generalized malignancy, Hodgkin disease, leukemia, lymphoma, multiple myeloma, and solid organ transplant; HIV infection; and sickle cell disease or other hemoglobinopathies.

CDC recommends facilities "check out" PneumoRecs VaxAdvisor Mobile App for Vaccine Providers. <https://www.cdc.gov/vaccines/vpd/pneumo/hcp/pneumoapp.html>. This app will help vaccination providers quickly and easily determine which pneumococcal vaccines a resident needs and when.



The PneumoRecs VaxAdvisor Mobile App was updated on September 28, 2023, to reflect CDC's updated pediatric pneumococcal vaccination recommendations.

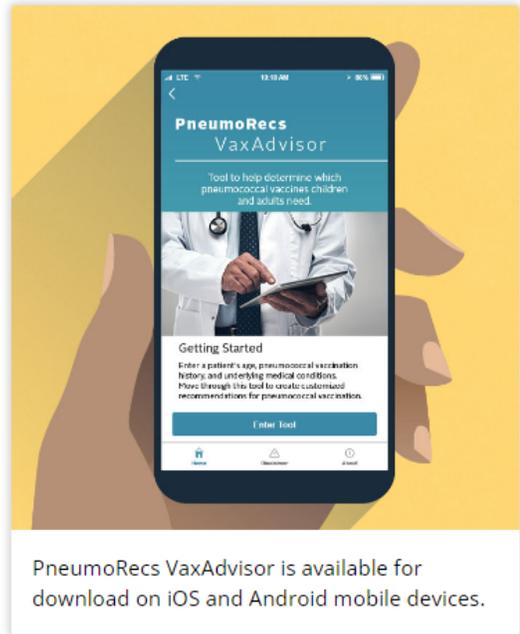
The *PneumoRecs VaxAdvisor* mobile app helps vaccination providers quickly and easily determine which pneumococcal vaccines a patient needs and when. The app incorporates recommendations for all ages so internists, family physicians, pediatricians, and pharmacists alike will find the tool beneficial.

Users simply:

- Enter a patient's age.
- Note if the patient has specific underlying medical conditions.
- Answer questions about the patient's pneumococcal vaccination history.

Then the app provides patient-specific guidance consistent with the immunization schedule recommended by the U.S. Advisory Committee on Immunization Practices (ACIP).

Download the mobile app or use the web version



I would strongly recommend every Infection Preventionist downloads the app or the website related to offering & obtaining consent or signed declination for the PCV20. This would be a quick way to substantiate that a resident is fully vaccinated in some circumstances.

Here is an example of a deficiency cited in early February.

F883 Influenza and Pneumococcal Vaccines: “The facility identified a census of 34 residents. The sample included 12 residents with five residents reviewed for immunizations, to include pneumococcal vaccinations (helps protect against serious illnesses like pneumonia). Based on record review and interviews, the facility failed to follow the latest guidance from the Centers for Disease Control and Prevention (CDC) when they failed to offer, obtain an informed declination or a physician-documented contraindication for the pneumococcal PCV 20 vaccination. This deficient practice placed the residents at risk of acquiring, spreading, and experiencing complications from the pneumococcal disease.”

The CDC app or website will assist the facility, the resident/representative and the physician to make a decision if administration of PCV20 is recommended.

This deficiency is being cited and is a fairly easy fix. In fact, F883 has been cited 13 times in FY2024.