



Protecting Two Generations: Clinical Strategies to Address Vaccination During Pregnancy and the Newborn Period

Wednesday, October 21, 2026
12:00 - 1:00 PM PDT

NORTHWEST VAX

Vax Northwest: About Us



Jazel Jane Bautista, RPh
Pharmacist and Pharmacy Owner, Acts Pharmacy



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Swedish Pediatric Specialty Care



Elias Kass, ND
Naturopathic Doctor, Dad, Vaccine Advocate, and Former Midwife

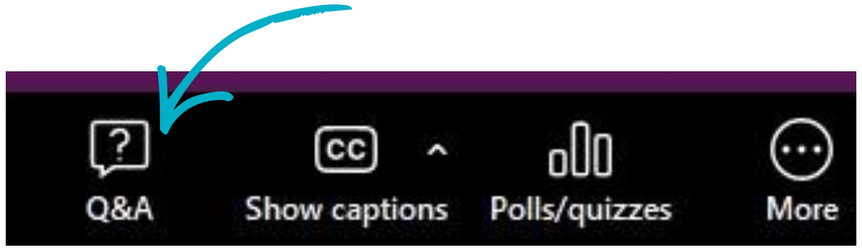


Sandra Wukelic, MPH
Partnerships Manager, Immunizations at WithinReach

NORTHWEST VAX

Before We Begin...

- Questions/Comments for the presenters? There will be time for Q&A following the end of the presentation. Throughout the presentation please put your questions in the Q&A box.



- Questions about Zoom/tech? (i.e., I can't hear, I can't see slides, etc.)? Send a direct chat message to XX for support.

- Today's meeting is being recorded and along with slides will be sent out to all registrants by October 28.

Today’s Learning Objectives

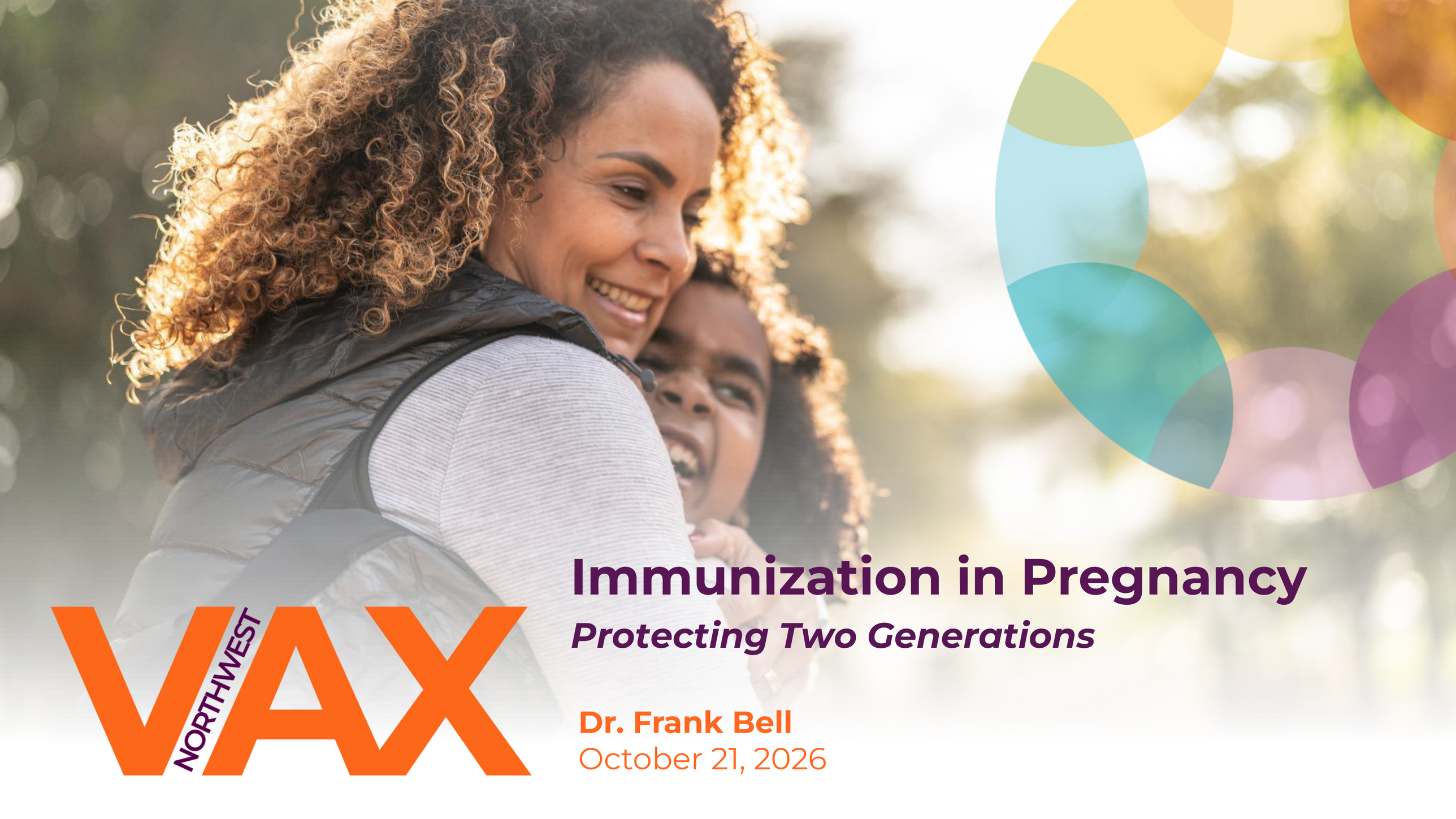
- Describe the benefits of vaccination for the pregnant person and for the newborn.
- Discuss 2026-27 respiratory vaccine recommendations for pregnant people.
- Identify ways to increase vaccine confidence in pregnant patients.
- Discuss strategies to support staff to incorporate vaccine conversations in clinic workflows.

Continuing Education

- Continuing education credits are available for nurses, medical assistants, pharmacists/pharmacy techs, and licensed midwives.
- A Certificate of Completion is also available.
- The planners and speakers of this activity have no relevant financial relationships with any commercial interests pertaining to this activity.

Continuing Education

- 1.0 contact hours are available for licensed midwives from the midwifery education accreditation council.
- Dr. Jéaux Rinedahl is a provider approved by the California Board of Registered Nursing (Provider #18100). Upon successful completion of this activity, 1.0 contact hours will be awarded.
- This program has been granted prior approval by the American Association of Medical Assistants (AAMA) for 1.0 administrative continuing education unit.
- This knowledge activity was approved by the Washington State Pharmacy Association for 1.0 contact hours. The Washington State Pharmacy Association is accredited by the Accreditation Council for Pharmacy Education as a Provider of continuing pharmacy education.



NORTHWEST VAX

Immunization in Pregnancy

Protecting Two Generations

Dr. Frank Bell

October 21, 2026



Immunization in Pregnancy

Protecting Two Generations

Frank Bell MD
Swedish Pediatric Infectious Disease, Seattle WA
Washington Chapter American Academy of Pediatrics (WCAAP)

10/21/2026

Active vs. Passive Immunization

Active

Administration of antigen(s) (e.g. protein), to which the host immune system responds

Passive

Administration of preformed (protective) antibody, NOT requiring an active host response

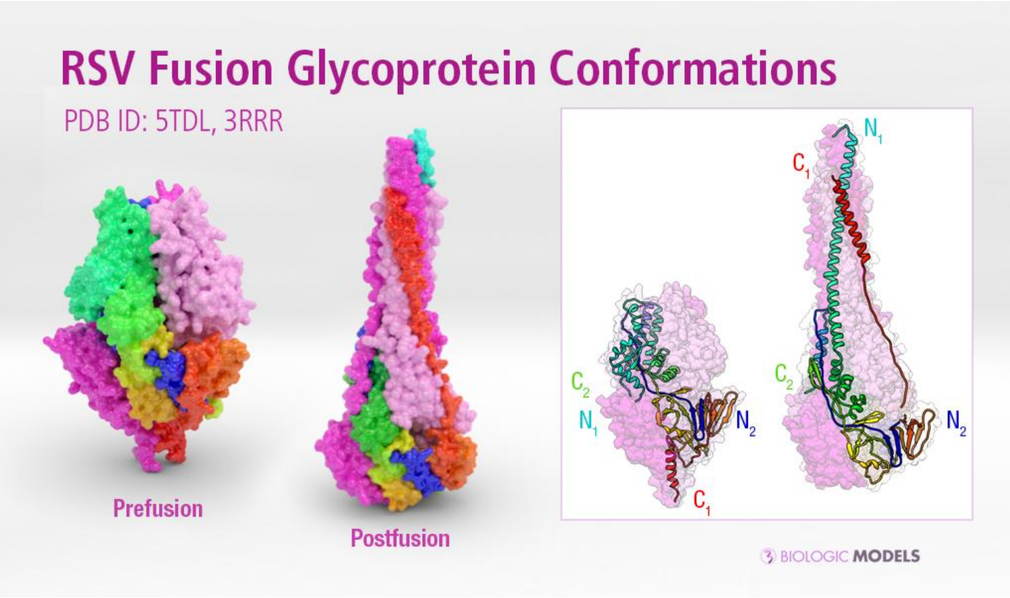
Active vs. Passive Immunization

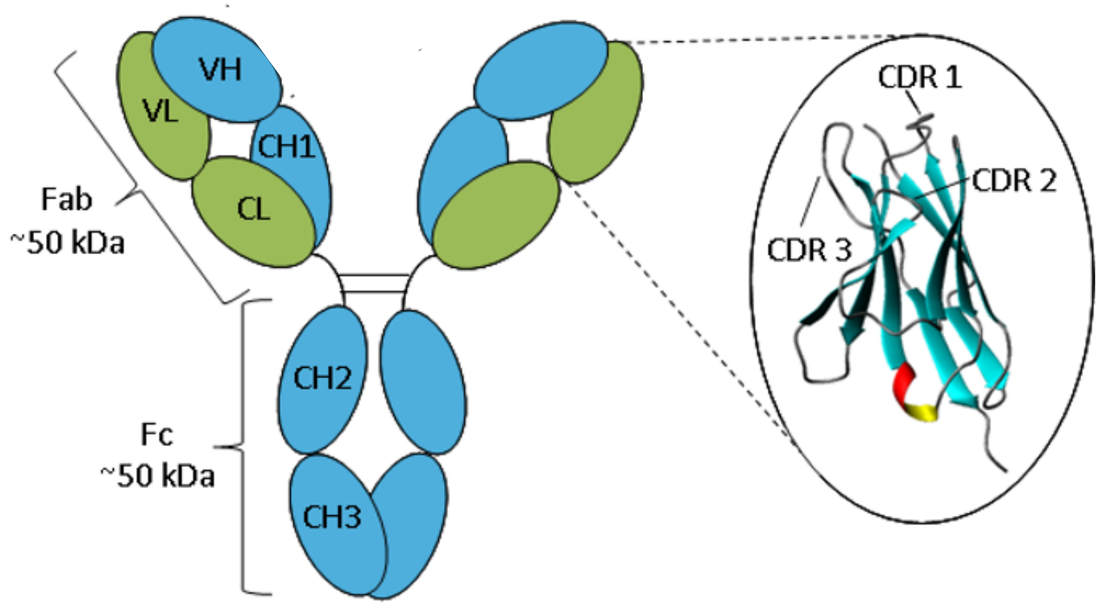
Active

Administration of antigen(s) (e.g. protein), to which the host immune system responds

Passive

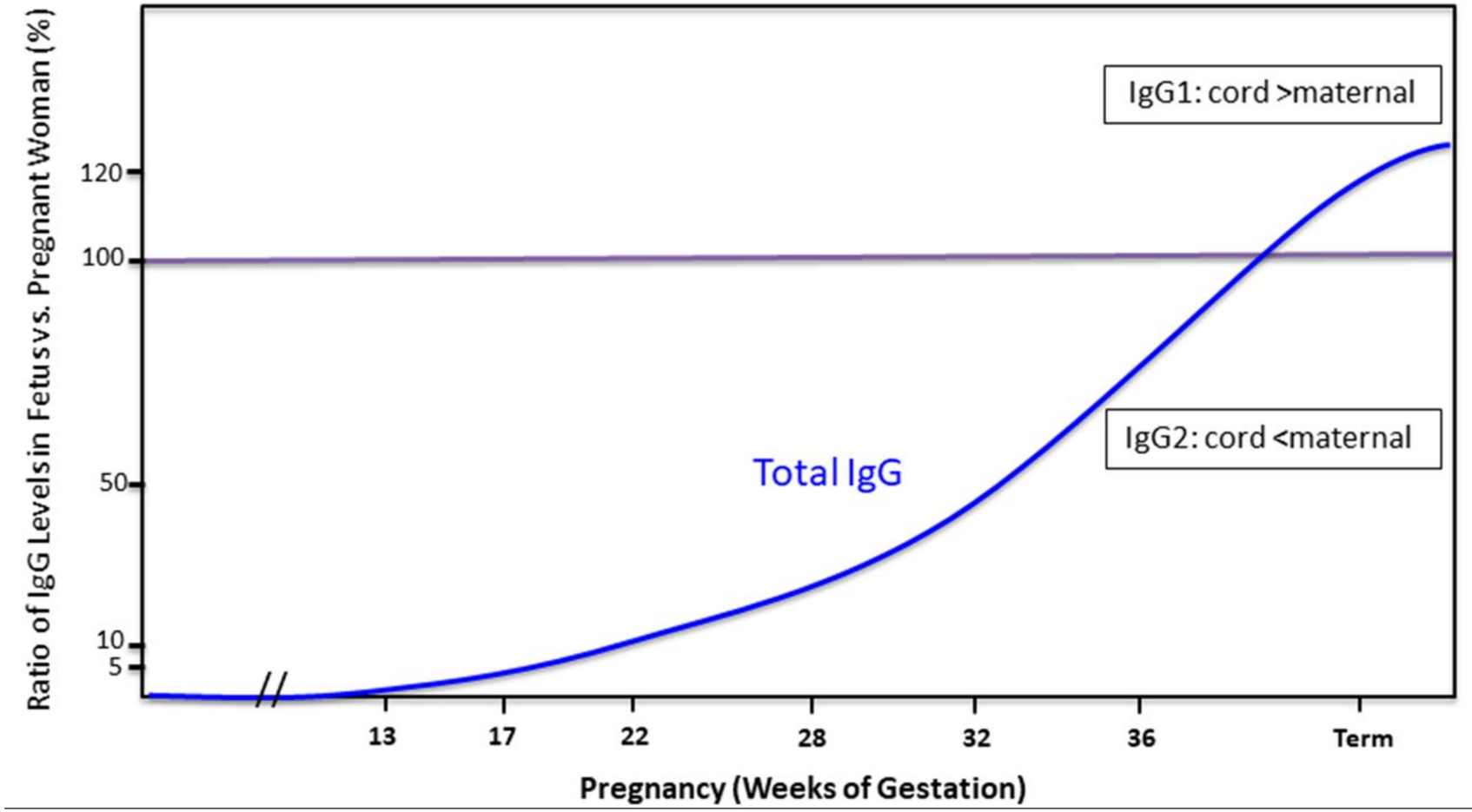
Administration of preformed (protective) antibody, NOT requiring an active host response





Passive transplacental immunization

IgG ratio (%age) Infant: Mom



Abu-Raya B, Maertens K, Neo Reviews 2021

ACOG/AAFP immunization recommendations 2026

- Tdap

‘Seasonal’

- Influenza
- COVID-19
- RSV

Maternal Immunization Schedule



Additional ACOG immunization recommendations

- Hepatitis B
- Pneumococcus
- Meningococcus (MCV4, MenB)
- Hepatitis A

Maternal Immunization



2026 Maternal Immunization Schedule

ACOG
American College of Obstetricians & Gynecologists

Summary of Routinely Recommended Maternal Vaccines

Vaccine	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul
Tdap	Can be administered at any time											
COVID-19		Administer as soon as available		However, can be administered any time of the year to eligible individuals								
Influenza		Ideally administer early fall		However, can be administered any time while the virus is circulating								
RSV		Administer September through March 1 in most of the continental U.S.*										

acog.org/maternal-immunization-schedule

Tdap vaccine in pregnancy

Administer to every pregnant person

- As early as possible in the gestational ‘window’ 27-36 weeks
- In each pregnancy, irrespective of the patient’s prior Tdap vaccination history

→ Provides infant protection against tetanus and pertussis

→ May use any licensed Tdap vaccine (*Boostrix™*, *Adacel™*)

Influenza vaccine in pregnancy

- Administer a ‘standard’ ‘inactivated’ (i.e. non-live) influenza vaccine, IIV (or RV), to every pregnant person
- At any time in pregnancy
- At any time of year, best in the early fall
- Do not administer live attenuated influenza vaccine (LAIV) in pregnancy

→ Provides maternal and infant protection against severe influenza

COVID-19 vaccine in pregnancy

- Administer any COVID-19 to every pregnant person
- At any time in pregnancy
- At any time of year
- May use any licensed COVID-19 vaccine

→ Provides maternal and infant protection against severe influenza

RSV vaccine in pregnancy

Offer RSV vaccine (*Abrysvo*™) to pregnant persons who have not been previously-immunized against RSV

- In the gestational window 32-36^{+6} weeks
- During the months Sept – March1
- Do <u>not</u> administer RSV vaccine to anyone immunized in a previous pregnancy
- Use only *Abrysvo*™ - (non-adjuvanted RSV PreF vaccine) for pregnant individuals, not other vaccine products licensed for seniors

RSV vaccine in pregnancy

Offer RSV vaccine (*Abrysvo*™) to pregnant persons who have not been previously-immunized against RSV

- In the gestational window 32-36^{+6} weeks
- During the months Sept – March1
- Do not administer RSV vaccine to anyone immunized in a previous pregnancy

Alternatively

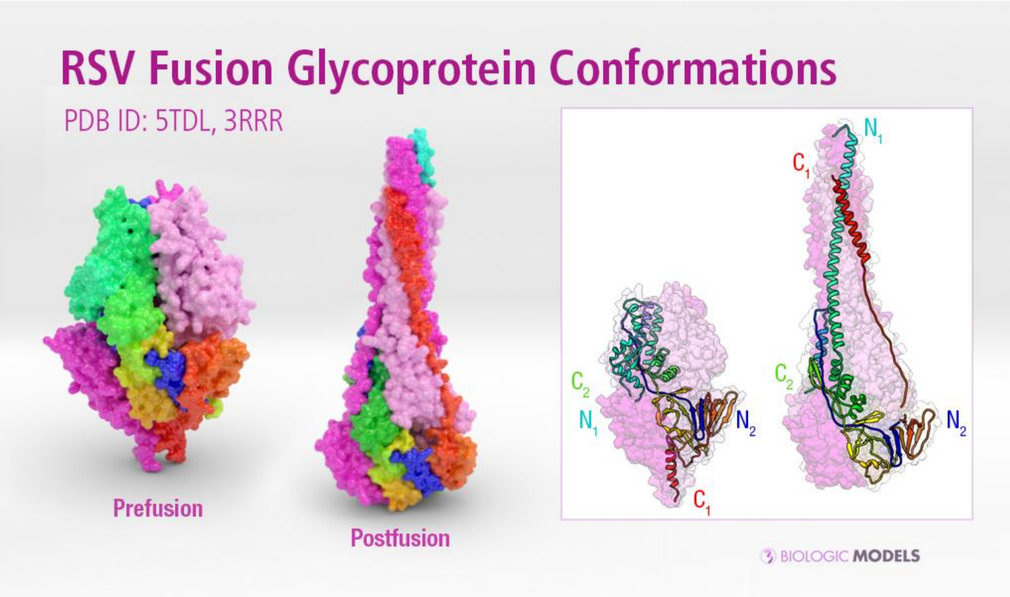
- Newborn infants may be administered RSV mAb after delivery (nirsevimab *or* clesrovimab)

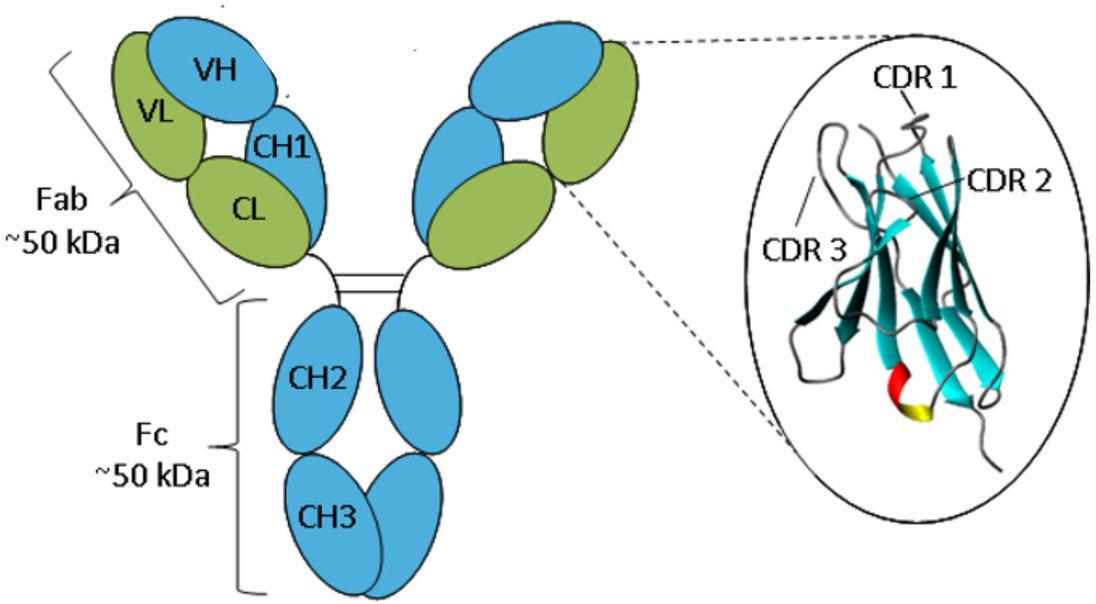
→ Either strategy provides infant protection against severe RSV disease

RSV immunoprophylaxis: active vs. passive immunization

Active Immunization
Administration to the MOTHER of RSV antigen (i.e. ‘pre-F’ protein) to initiate a maternal antibody response, antibody is then transported across the placenta

Passive Immunization
Administration to the INFANT of a preformed monoclonal antibody directed against the RSV ‘F’ protein





2026 Maternal Immunization Schedule

ACOG
American College of Obstetricians & Gynecologists

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acog.org/maternal-immunization-schedule

Vaccines recommended during pregnancy

	FIRST TRIMESTER* (1–13 weeks†)	SECOND TRIMESTER (14–27 weeks)	THIRD TRIMESTER (28–40 weeks)
Influenza (Flu)	Any trimester, at any time of the year, although it's best to receive it in early fall.		
COVID-19	Any trimester, although it's best to receive it as soon as possible during pregnancy, at any time of the year.		
Tetanus, diphtheria, and pertussis (Tdap)			Preferably as early as possible between 27 and 36 weeks, at any time of the year.
Maternal respiratory syncytial virus (RSV)			Only between 32 and 36 weeks of pregnancy in your first pregnancy, from September 1 through March 1 in most parts of the U.S. If you had the RSV vaccine during a previous pregnancy, you do not need to get it again, but your baby should get a shot of monoclonal antibody after birth. Your baby can also get this shot instead of you receiving the maternal vaccine.

* First trimester is measured from first day of the last menstrual period.
† Each trimester concludes with completed weeks (eg, 13 weeks and 6 days).

acog.org/womens-health/maternal-immunization-schedule

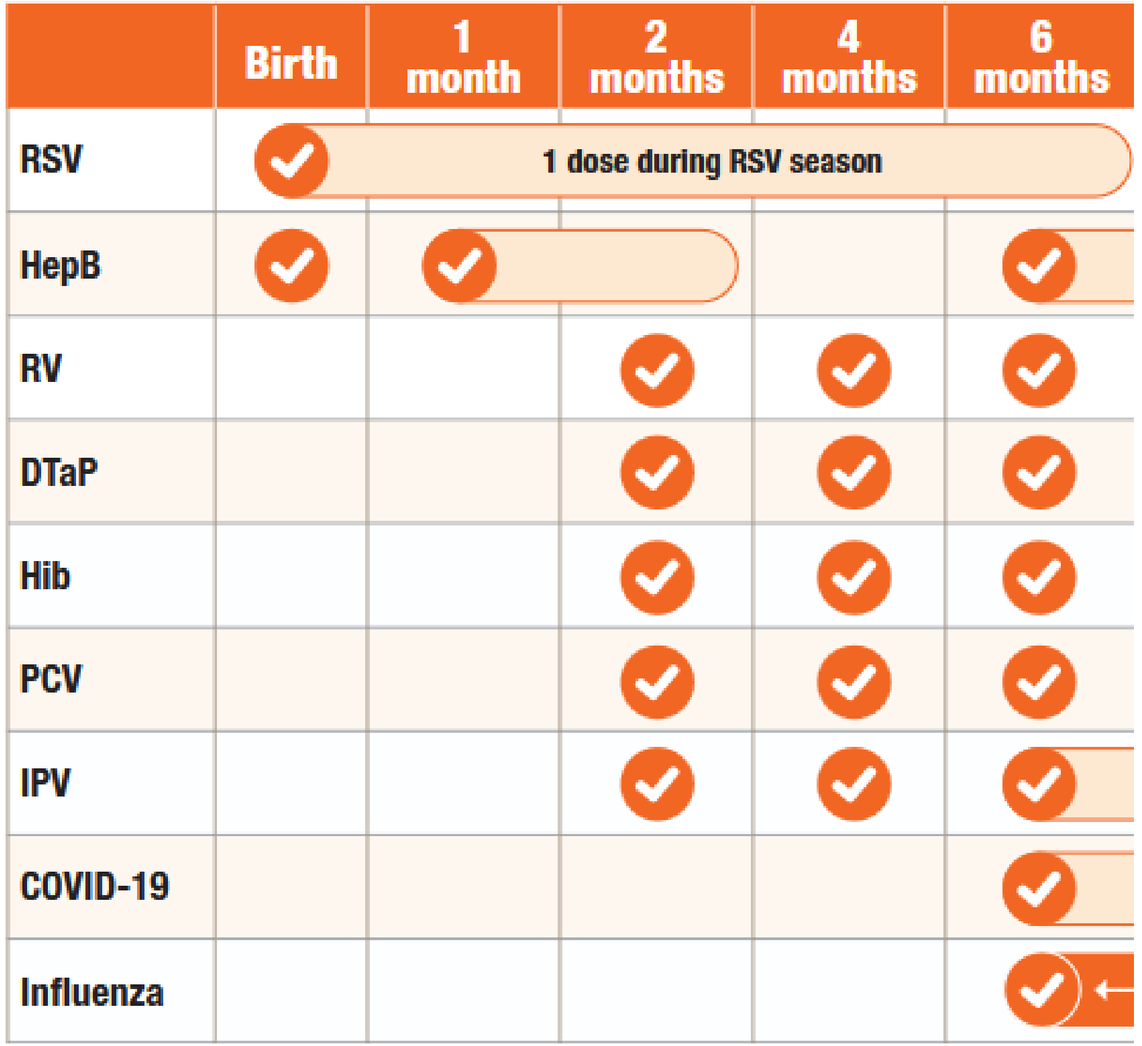
Immunization counseling in pregnancy

Counseling should include education about

- Vaccines indicated in pregnancy, AND
- Infant immunizations anticipated at the time of delivery, AND
- at newborn visits over the first 6+ months of life

American Academy of Pediatrics 2026 Recommended Immunization Schedule

Children: Birth Through 6 Years Old



www.healthychildren.org

AAP-recommended immunization schedule 2026

At or soon after delivery

- Hepatitis B
- RSV Monoclonal Ab - if a) RSV vaccine not administered in pregnancy, & b) given at least 14d prior to delivery
- OK to co-administer

AAP-recommended immunization schedule 2026

Birth to age 6 months

- Age 2 months DTaP, IPV, Hib, HepB, PCV, Rota
- Age 4 months DTaP, IPV, Hib, HepB, PCV, Rota
- Age 6 months DTaP, IPV, Hib, HepB, PCV, Rota
- After > 6 months'Flu, COVID-19

AAP-recommended immunization schedule 2026

Birth to age 6 months

- Age 2 months DTaP-IPV-Hib-HepB + PCV + Rota
- Age 4 months DTaP-IPV-Hib-(HepB) + PCV + Rota
- Age 6 months DTaP-IPV-Hib-HepB + PCV + Rota

Infant combination vaccines:

DTaP-IPV-Hib-HepB = *Vaxelis* ™

DTaP-IPV/Hib = *Pentacel* ™

DTaP-HepB-IPV = *Pediarix* ™



Expecting?

Protect yourself and your baby against flu, RSV, whooping cough, and COVID-19!

If your doctor refers you to a pharmacy, ask for a prescription for the shots you need. Make sure the pharmacist gives you a vaccine record to bring to your next prenatal visit! You can also download your digital vaccine record at mydvr.cdph.ca.gov.

For more information, visit:

The American College of Obstetricians and Gynecologists (ACOG) website for prenatal vaccination

℞

Prescriber Name, Address, Phone Number:

Patient Name:_____ Date:_____

Vaccines recommended during pregnancy:

- ☐ **Tdap** (tetanus, diphtheria, pertussis [whooping cough]) 0.5 mL IM x 1 between 27 and 36 weeks of pregnancy.
- ☐ **Inactivated Influenza** 0.5 mL IM x 1
- ☐ **Updated COVID-19 vaccine**
- ☐ **Respiratory Syncytial Virus (RSV) vaccine (ABRYSVO)** 0.5 mL IM x 1 September-January, between 32 and 36 weeks of pregnancy.

Prescriber's Signature:_____ License #:_____

Per pharmacy regulations (CCR, Title 16, section 1746.4), please notify us within 14 days of administration of the vaccines our patient received at your pharmacy. Also, please give the patient a copy of the vaccine record to bring to their next prenatal visit.

Your baby is counting on you for protection. Get vaccinated.

ACOG/AAFP/AAP-recommended vaccines in pregnancy
- Protecting Two Generations -

Vaccines are the safest way to protect pregnant persons

AND their infants against severe disease caused by

- Influenza
- COVID-19
- Pertussis
- RSV
- OK to co-administer vaccines at the same visit

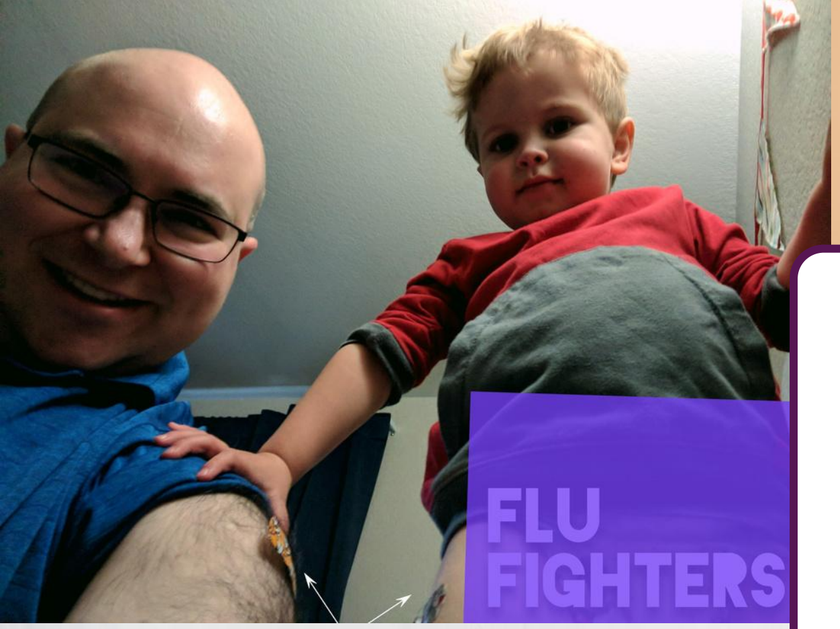


Immunization advice in pregnancy, after delivery and for the newborn

Offer a strong, presumptive vaccine recommendation



Provider Panel









Q&A







Obtaining Continuing Education

- There is no cost for CEs
- Expiration date is 01/21/27
- Successful completion of this continuing education activity includes the following:
  - Attending the entire live webinar or watching the webinar recording, and completing the evaluation

- Create an account or log in to TRAIN.org.This system allows attendees to automatically generate CE certificates or certificates of completion after completing the evaluation.
- If you haven't already registered for this webinar in **TRAIN** and want CE credit, please search and **register for the recording**, which will be available next week.
- For any questions, please send an email to trang.kuss@doh.wa.gov

Dive Deeper With Additional Resources

- Morning Vax Views – Daily Roundup of vaccine news and resources: https://docs.google.com/forms/d/e/1FAIpQLSeRuA7S6suSdc5jgR2FuMHPif3jKHqKMfK_mj_EeC2N4J6CbA/viewform
- Information on Vaccines and Vaccine Safety to share with Patients: https://www.chop.edu/vaccine-education-center
- Vaccine Training for Medical Assistants Free E-Course: https://immunitycommunitywa.org/courses/vaccine-training-for-medical-assistants/
- **NEW** Co-brandable Respiratory Vaccine Recommendations Poster/Flyer by Vax Northwest:
  - **How to Customize:**
    - Click on the co-brandable template
    - Click “Use template for new design” in Canva
    - Upload your clinic’s logo using the “Uploads” tool on the left bar
    - Drag your logo to replace the “*Add your logo here*” text in the bottom left
    - Click “Share” and download the custom resource in your preferred format
    - ***Optional:*** Print via a print shop or online service

Stay Connected

- Join **Vax Northwest**! Email **ic@withinreachwa.org** if you are interested in learning more.

- Join the **Immunization Action Coalition of Washington** or a local immunization coalition in your area!



Thank You

- Contact ic@withinreachwa.org to stay connected to Vax Northwest activiites and future webinars.
- Contact trang.kuss@doh.wa.gov for questions related to CE credit.