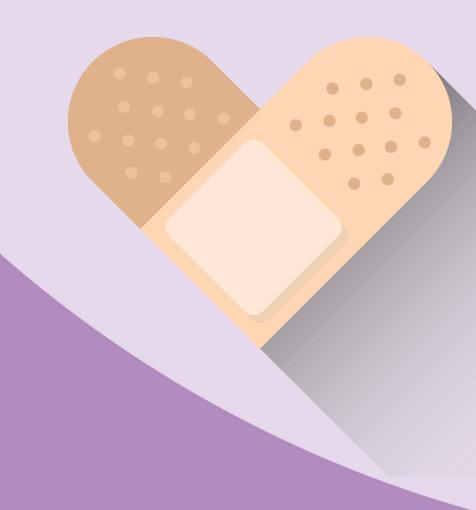


Open Forum:
The Latest
Recommendations for
COVID-19 and
Influenza Vaccinations

September 20, 2022



## Host and Moderator



Michael Hogue, PharmD, FAPhA, FNAP Dean and Professor, Loma Linda University School of Pharmacy

## Today's Focus

Discuss the latest recommendations for COVID-19 bivalent boosters and how to implement programs for COVID-19 and influenza vaccination this Fall.





## CDC Acknowledgement

This accredited learning activity for pharmacists was developed by the American Pharmacists Association with support from the CDC.

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## Guest Speaker



John Grabenstein, RPh, PhD, FAPhA Director for Scientific Communications, Immunize.org President, Vaccine Dynamics



## Guest Speaker



### Gretchen Garofoli, PharmD, BCACP, **CTTS**

Associate Professor, West Virginia University School of Pharmacy



## Disclosures

Michael Hogue, PharmD, FAPhA, FNAP, has provided the following disclosures: Advisory board participation with Sanofi Pasteur

John Grabenstein, RPh, PhD, FAPhA, has provided the following disclosures: Hourly consultant to Bavarian Nordic; CSL (Seqirus); JNJ (Janssen); Takeda; Valneva; VBI Vaccines

Gretchen Garofoli, PharmD, BCACP, CTTS has nothing to disclose.

All other individuals involved in the development of this material declare no conflicts of interest, real or apparent, and no financial interests in any company, product, or service mentioned in this program, including grants, employment, gifts, stock holdings, and honoraria. APhA's editorial staff declare no conflicts of interest or financial interests in any product or service mentioned in this activity, including grants, employment, gifts, stock holdings, and honoraria. For a complete list of APhA staff disclosures, please visit the APhA website at <a href="https://www.pharmacist.com/apha-disclosures">www.pharmacist.com/apha-disclosures</a>.



## Learning Objectives

- 1. Compare the latest COVID-19 and influenza vaccine products and recommendations for use.
- 2. Describe practical strategies for managing COVID-19, influenza and other vaccination needs emerging this fall.
- 3. Discuss common concerns and questions and how they can be addressed to build vaccine confidence.



## Open Forum Ground Rules

- Use the Questions field on the GoToWebinar toolbar to submit comments and questions related to the topic discussion.
- We will try to get to as many comments and questions as possible!
- Refer to the Handout in the GoToWebinar toolbar to access today's slides and links to resources.
- Today's recording will be made available soon.



## Discussion with John Grabenstein and Gretchen Garofoli

Discuss the latest recommendations for COVID-19 bivalent boosters and how to implement programs for COVID-19 and influenza vaccination this Fall.





### Celebrate! Success after 22 months of COVID-19 vaccinations!

- > 270 million COVID-19 vaccinations given by community pharmacists and teams, Dec 2020—Sep 2022 45% of U.S. COVID-19 vaccinations given by community pharmacists and teams, Dec 2020—Sep 2022
- > 50% of U.S. COVID-19 vaccinations via pharmacist-led programs in all settings, Dec 2020—Sep 2022
  - 8.1 million COVID-19 vaccinations given by pharmacists at long-term care facilities, Dec 2020—Apr 2021
  - **1.3 million** vaccinations given by student pharmacists via "Operation Immunization," Dec 2020—Jun 2021
- **2/3 drop** COVID-19 deaths among LTC residents fell by 2/3 compared to all COVID-19 deaths, Dec 2020-Feb 2021
- > 5.4 million inpatients cared for by pharmacists and teams, Feb 2020—Sep 2022
- > 42 million patient specimens tested by pharmacists for COVID-19, Apr 2020—Jul 2022
- > 100,000 COVID-19 monoclonal antibody treatments provided by pharmacists, Nov 2020—Jun 2022
  70% of vaccinating pharmacies located in communities with moderate-to-high social vulnerability
- Overall, U.S. pharmacists and teams provided > 350 million interventions to > 150 million people

Grabenstein JD. Essential services: Quantifying the contributions of America's pharmacists in COVID-19 clinical interventions. Journal of American Pharmacists Association 2022;62: in press. doi.org/10.1016/j.japh.2022.08.010



## Bivalent COVID-19 Booster Recommendations

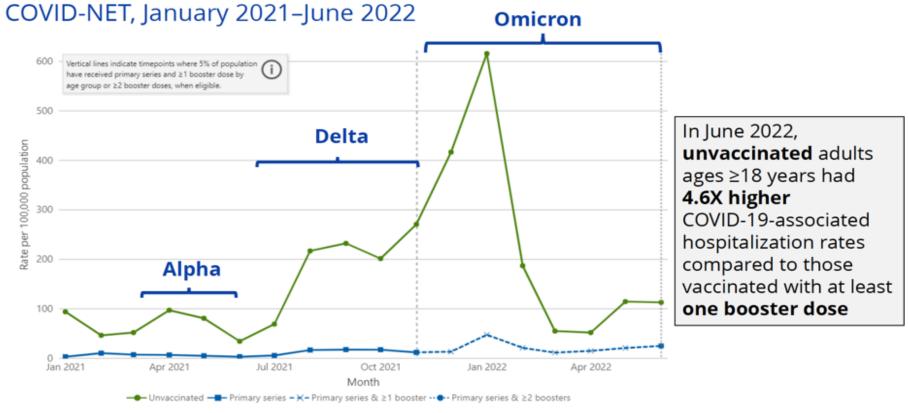
- Recommended for everyone 12 years of age and older
  - People 12-17 years of age can only receive Pfizer bivalent booster
  - People 18 years of age and older can receive either the Pfizer or Moderna bivalent booster
- At least 2 months (8 weeks) after any previous dose
  - Final dose in a primary series
  - Last monovalent booster dose
- The enhanced booster shot should be administered to all persons in this age range, regardless of the number of monovalent booster doses the person has previously received

CDC. Stay Up to Date with COVID-19 Vaccines Including Boosters. <a href="https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html">https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html</a>. September 8, 2022.



## Why Should a Booster Dose Be Given?

Age-Adjusted Rates of COVID-19-Associated Hospitalization by Vaccination Status and Receipt of Booster Dose in Adults Ages ≥18 Years



CDC COVID Data Tracker. https://covid.cdc.gov/covid-data-tracker/#covidnet-hospitalizations-vaccination Accessed August 3, 2022

Dr. Scobie. ACIP Sept 1, 2022. www.cdc.gov/vaccines/acip.

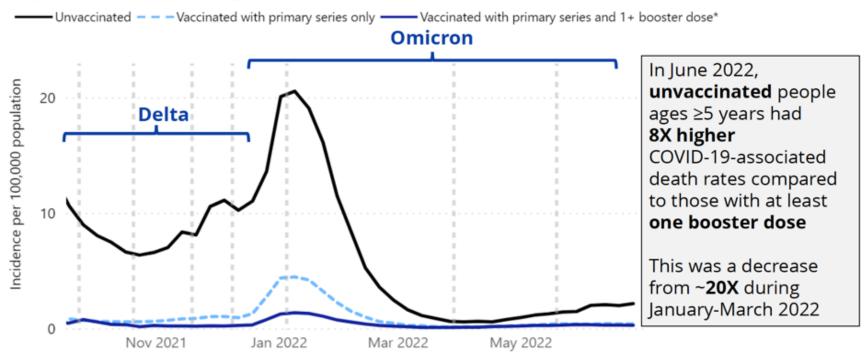
**VaccineConfident** 



## Why Should a Booster Dose Be Given?

## Age-Adjusted Rates of COVID-19-Associated Deaths by Vaccination Status and Receipt of Booster Dose\* Among Ages ≥5 years

September 19, 2021 – July 2, 2022 (29 U.S. Jurisdictions)



Positive specimen collection by start of week

Dr. Scobie. ACIP Sept 1, 2022. www.cdc.gov/vaccines/acip.



<sup>\*</sup>This includes people who received booster doses and people who received additional doses. Vertical lines denote changes in booster dose recommendations. CDC COVID Data Tracker. https://covid.cdc.gov/covid-data-tracker/#rates-by-vaccine-status Accessed August 24, 2022

### **COVID-19 Vaccine**

Interim COVID-19 Immunization Schedule for Persons 6 Months of Age and Older



**Table 3. COVID-19 Vaccine Products Summary** 

Туре	Product*	Age Indications <sup>†</sup>	Diluent	Dose/Injection Amount		
mRNA vaccine	MONOVALENT Moderna: Blue vial cap with magenta-bordered label	6 months through 5 years	NONE	Any dose in the primary series. Booster doses are not recommended for this age group.	25 μg/ 0.25 mL	
	MONOVALENT Moderna: Blue vial cap with purple-bordered label	6 through 11 years	NONE	Any dose in the primary series. Booster doses are not authorized for children, ages 6 through 11 years, who received a Moderna primary series.	50 μg/0.5 mL	
	MONOVALENT Moderna: Red vial cap with blue- bordered label	12 years and older	NONE	Any dose in the primary series.	100 μg/ 0.5 mL	
	BIVALENT Moderna: Blue vial cap with gray-bordered label	18 years and older	NONE	Booster dose	50 μg/0.5 mL	
	MONOVALENT Pfizer-BioNTech: Maroon vial cap with maroon-bordered label	6 months through 4 years	2.2 mL 0.9% sodium chloride (normal saline, preservative-free)	Any dose in the primary series. Booster doses are not recommended for this age group.	3 μg/0.2 mL	
	MONOVALENT Pfizer-BioNTech: Orange vial cap with orange-bordered label	5 through 11 years	1.3 mL 0.9% sodium chloride (normal saline, preservative-free)	Any dose in the primary series and booster doses	10 μg/0.2 mL	
	MONOVALENT Pfizer-BioNTech: Gray vial cap with a gray- bordered labe	12 years and older	NONE	Any dose in the primary series	30 μg/0.3 mL	
	BIVALENT Pfizer-BioNTech: Gray vial cap with gray-bordered label	12 years and older	NONE	Booster dose	30 μg/0.3 mL	
Protein sub unit vaccine	MONOVALENT Novavax: Royal blue cap	12 years and older	NONE	Any dose in the primary series.	5 μg rS and 50 μg of Matrix-M™ adjuvant/0.5 mL	
Viral vector vaccine	MONOVALENT Janssen Blue Cap	18 years and older	NONE	Janssen COVID-19 vaccine is authorized for use in certain limited situations due to safety considerations. <sup>‡</sup>	5×1010 viral particles/0.5 mL	

<sup>\*</sup> Complete the primary series with same product. If the vaccine product previously administered cannot be determined, is no longer available or contraindicated, any age-appropriate monovalent COVID-19 vaccine may be administered at least 28 days after the first dose to complete the primary series. Age-appropriate Moderna or Pfizer-BioNTech bivalent COVID-19 vaccine can be administered for the booster dose, regardless of the primary series product.

## Interim COVID-19 Immunization Schedule for Persons 6 Months of Age and Older

www.cdc.gov/vaccines/covid-19/downloads/COVID-19immunization-scheduleages-6months-older.pdf As of 9/7/22



<sup>†</sup> Administer the appropriate vaccine product based on the recipient's age and the vaccine product's age indications.

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Interim COVID-19 Immunization Schedule for Persons 6 Months of Age and Older



**Table 3. COVID-19 Vaccine Products Summary** 

Type	Product*	Age Indications <sup>†</sup>	Diluent	Dose/Injection Amoui	nt	
	MONOVALENT Moderna: Red vial cap with blue- bordered label	12 years and older	NONE	Any dose in the primary series.	100 μg/ 0.5 mL	
mRNA	BIVALENT Moderna: Blue vial cap with gray-bordered label	18 years and older	NONE	Booster dose	50 μg/0.5 mL	
	MONOVALENT Pfizer-BioNTech: Gray vial cap with a gray- bordered label	12 years and older	NONE	Any dose in the primary series	30 μg/0.3 mL	4
	BIVALENT Pfizer-BioNTech: Gray vial cap with gray-bordered label	12 years and older	NONE	Booster dose	30 μg/0.3 mL	•

<sup>\*</sup> Complete the primary series with same product. If the vaccine product previously administered cannot be determined, is no longer available or contraindicated, any age-appropriate monovalent COVID-19 vaccine may be administered at least 28 days after the first dose to complete the primary series. Age-appropriate Moderna or Pfizer-BioNTech bivalent COVID-19 vaccine can be administered for the booster dose, regardless of the primary series product.

### Interim COVID-19 Immunization Schedule for Persons 6 Months of Age and Older

<sup>†</sup> Administer the appropriate vaccine product based on the recipient's age and the vaccine product's age indications.

<sup>‡</sup> For guidance on retrospective record review, scheduling and administration see www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us-appendix.html#appendix-a

## COVID-19 Vaccines and Error Avoidance

Monovalent label Primary series only Ages 6–11 years



Bivalent label
Booster dose only
Ages 18 years and older



Despite label, do NOT use for booster doses

Monovalent Moderna product authorized for individuals ages 6–11 years old has a dark blue cap and purple label border.

Bivalent Moderna product has a dark blue cap and a gray label border.

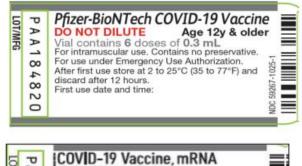
Dr. Hall. ACIP Sept 1, 2022. www.cdc.gov/vaccines/acip.



VaccineConfident.Pharmacist.com

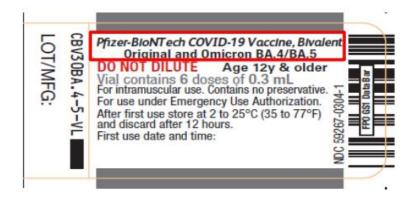
## COVID-19 Vaccines and Error Avoidance

Monovalent label Primary series only Ages 12 years and older





Bivalent label Booster dose only Ages 12 years and older



The bivalent and monovalent Pfizer-BioNTech products both have gray caps and gray label borders, as pictured above.

Dr. Hall. ACIP Sept 1, 2022. www.cdc.gov/vaccines/acip.



## COVID-19 Vaccines and Error Avoidance

Five Rights	Application to COVID-19 Vaccines	Comment
Right person	Age today? Immunocompromised? Prior COVID-19 vaccine: # of doses? which brand?	Pick the right flow diagram  Assess record card or IIS
Right time	Interval since last vaccination (≥ 2 months since prior vaccination)	Assess record card or IIS
Right drug	What's in stock? Bivalent only if primary series complete and Moderna: age 18+ Pfizer/BNT: age 12+  Right package: Moderna bivalent = blue cap/gray label Pfizer/BNT bivalent = "bivalent"	Read the carton and vial labels  Use the current (revised) Fact Sheet
Right dose	Moderna bivalent = 50 mcg (not 100) Pfizer/BNT bivalent = 30 mcg	Refresh training on storage and handling
Right route	IM injection	Consider anterolateral thigh for multiple vaccines



## Error Prevention Strategies in Practice

- Store different types of vaccines separately in refrigerator/freezer
- Clearly mark which COVID-19 vaccines are utilized for primary series vs booster
- Indicate age restrictions for each vaccine type
  - COVID-19 vaccines
  - Influenza vaccines



## Error Prevention Strategies in Practice





## Error Prevention Strategies in Practice







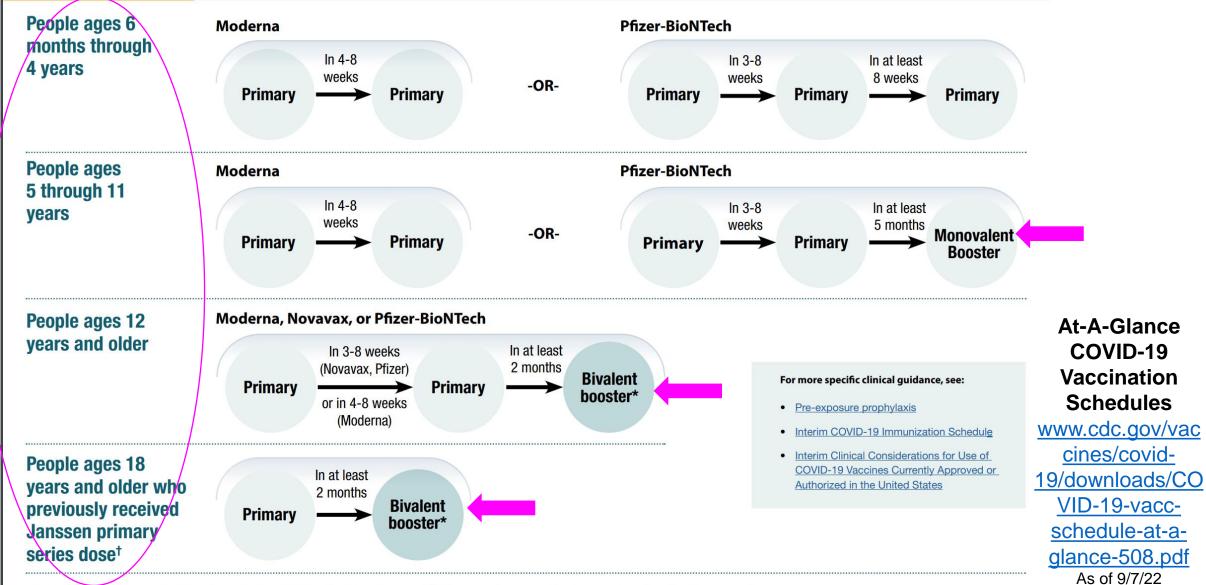


### At-a-Glance

### **COVID-19 Vaccination Schedule for Most People**



(People who are NOT Moderately or Severely Immunocompromised)



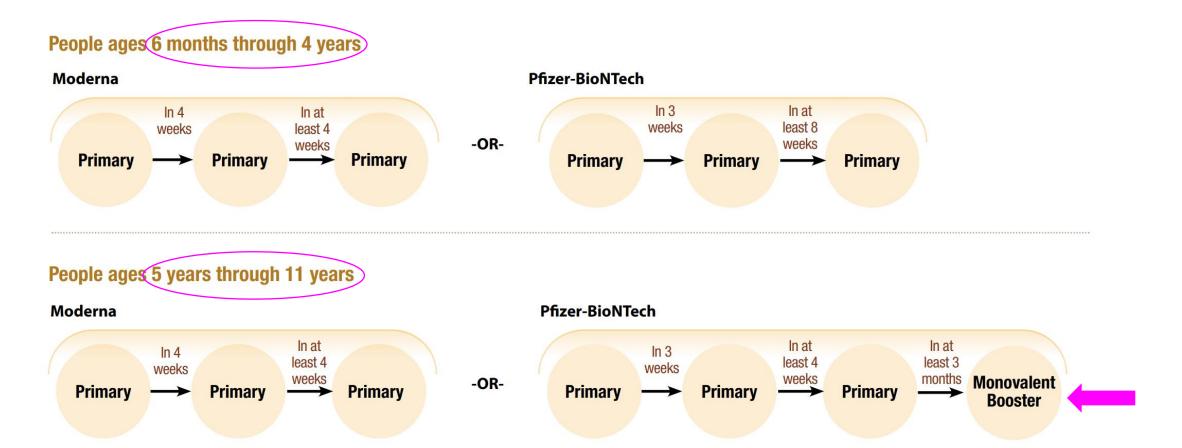
Note: This schedule does not include clinical details necessary for administering COVID-19 vaccines. For clinical details, see the resources at the end of this document.

<sup>\*</sup> The bivalent booster dose is administered at least 2 months after completion of the primary series. For people who previously received a monovalent booster dose(s), the bivalent booster dose is administered at least 2 months after the last monovalent booster dose.

### **At-a-Glance**

## **COVID-19 Vaccination Schedule for People Who Are Moderately or Severely Immunocompromised**





### For more specific clinical guidance, see:

- Pre-exposure prophylaxis
- Interim COVID-19 Immunization Schedule
- Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States

### At-A-Glance COVID-19 Vaccination Schedules

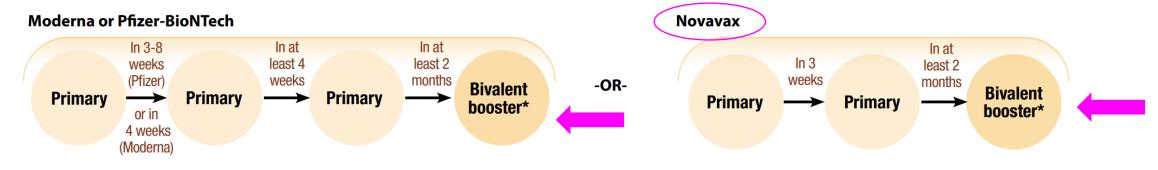
www.cdc.gov/vaccines/covid-19/downloads/COVID-19-vacc-schedule-at-aglance-508.pdf As of 9/7/22

### **At-a-Glance**

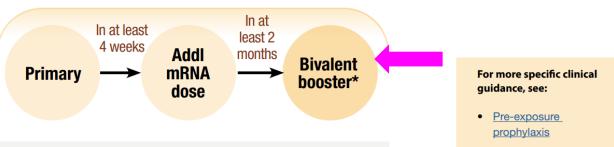
## **COVID-19 Vaccination Schedule for People Who Are Moderately or Severely Immunocompromised**



### People ages 12 years and older

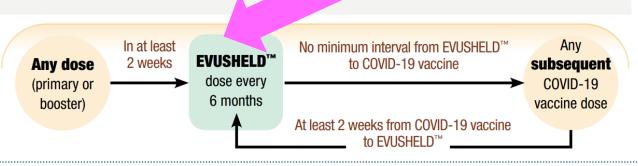


People ages 18 years and older who previously received Janssen primary series dose<sup>†</sup>



## Monoclonal antibodies (EVUSHELD™) for COVID-19 pre-exposure prophylaxis

People ages 12 years and older (must weigh at least 40kg)



- Interim COVID-19
  Immunization
  Schedule
- Interim Clinical
   Considerations for
   Use of COVID-19
   Vaccines Currently
   Approved or
   Authorized in the
   United States

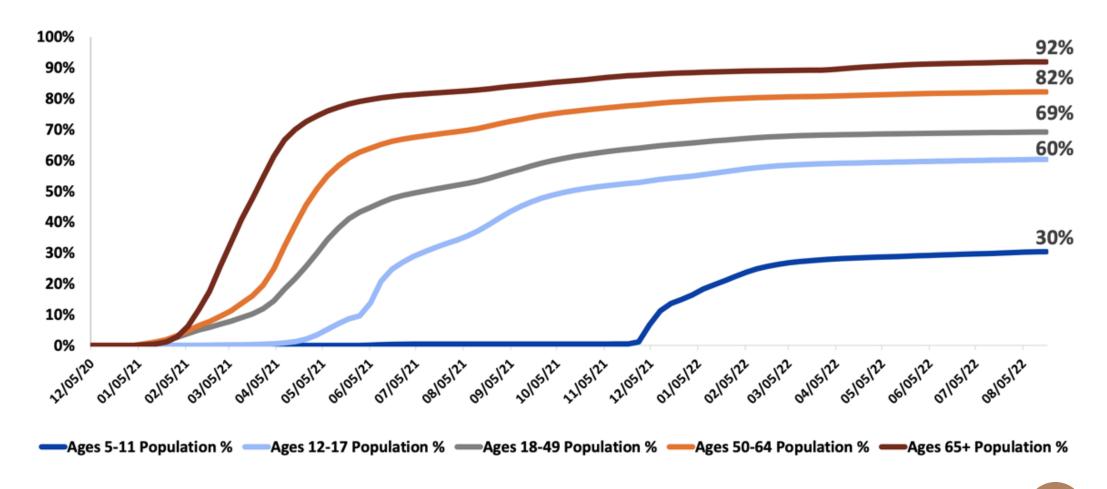
COVID-19
Vaccination
Schedules
www.cdc.gov/vacc
ines/covid19/downloads/CO

At-A-Glance

schedule-at-aglance-508.pdf As of 9/7/22

VID-19-vacc-

## Percent of population with a completed COVID-19 primary series – United States, January 2020 – August 2022



Dr. Oliver. ACIP, Sept. 1, 2022. www.cdc.gov/vaccines/acip







Morbidity and Mortality Weekly Report

August 26, 2022

Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2022–23 Influenza Season

"Influenza vaccines might be available as early as July or August, but for most persons who need only 1 dose of influenza vaccine for the season, vaccination should ideally be offered during September or October. However, vaccination should continue after October and throughout the season as long as influenza viruses are circulating and unexpired vaccine is available.

For most adults (particularly adults aged ≥65 years) and for pregnant persons in the first or second trimester, vaccination during **July and August should be avoided** unless there is concern that vaccination later in the season might not be possible.

Certain children aged 6 months through 8 years need 2 doses; these children should receive the first dose as soon as possible after vaccine is available, including during July and August. Vaccination during July and August can be considered for children of any age who need only 1 dose for the season and for pregnant persons who are in the third trimester if vaccine is available during those months. ...

ACIP recommends that adults aged ≥65 years preferentially receive any one of the following higher dose or adjuvanted influenza vaccines: quadrivalent high-dose inactivated influenza vaccine (HD-IIV4), quadrivalent recombinant influenza vaccine (RIV4), or quadrivalent adjuvanted inactivated influenza vaccine (aIIV4). If none of these three vaccines is available at an opportunity for vaccine administration, then any other ageappropriate influenza vaccine should be used. ... "

CDC MMWR. <a href="https://www.cdc.gov/mmwr/volumes/71/rr/pdfs/rr7101a1-H.pdf">https://www.cdc.gov/mmwr/volumes/71/rr/pdfs/rr7101a1-H.pdf</a>. August 26, 2022.

## Learning Collaborative Feedback

- Concerns from pharmacy team members
  - Error prevention
  - Lack of adequate staffing
  - Inventory management for influenza and COVID-19 vaccines
- Concerns from patients



## **CDC** Resources

cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us

### Use of COVID-19 Vaccines in the United States

Interim Clinical Considerations

### Summary of recent changes (last updated September 2, 2

- New booster recommendation for people ages 12 years and older to receive completion of a monovalent primary series; it replaces all prior booster reco
  - Recommendations for use of a bivalent Moderna booster dose in peop
  - o Recommendations for use of a bivalent Pfizer-BioNTech booster dose
- Updated guidance for observation periods following COVID-19 vaccination
- Updated guidance on COVID-19 vaccination and multisystem inflammatory adults (MIS-A)

### Reference Materials

- Summary Document for Interim Clinical Considerations (Updated 9/13/2022)
- Interim COVID-19 Immunization Schedule (Updated 9/7/2022)

### At-a-Glance

months through

### **COVID-19 Vaccination Schedule for Most People**

(People who are NOT Moderately or Severely Immunocompromised)

Moderna

Pfizer-BioNTech

In 4-8

weeks

Primary

People ages
5 through 11
years

Moderna

Pfizer-BioNTech

In 4-8
weeks
Primary

Primary

Primary

Primary

Primary

Primary

In at least
5 months
Mono
Boo

People ages 18 years and older who previously received Janssen primary series dose<sup>†</sup> Primary

In at least 2 months

Bivalent booster\*

### **COVID-19 Vaccine**

Interim COVID-19 Immunization Schedule for Persons 6 Months of Age and Older



The following tables provide guidance for COVID-19 vaccination schedules based on age and medical condition.

- Administer the appropriate vaccine product based on the recipient's age and the product's age indications.
- Monovalent vaccine should be used for primary series doses.
   COVID-19 vaccine is a 2- or 3-dose primary series, depending on the recipient's age, immune state and the product used.
- For persons 12 years of age and older, administer a booster dose of bivalent vaccine after the primary series, regardless of the number of previous monovalent booster doses.
  - COVID-19 vaccines may be administered on the same day as other vaccines, including influenza vaccine.

### Table 1. Immunization Schedule for Children 6 Months through 17 Years of Age

Туре	Recipient Age	Product*	Fo	or Most People		Those Who ARE Moderately or Severely Immunocompromised	
			Doses	Interval Between Doses	Doses	Interval Between Doses	
	6 months	MONOVALENT	Primary series: Monovalent				
	through 5 years	Moderna: Blue vial cap with magenta- bordered label	Dose 1 to 2	At least 4–8 weeks‡	Dose 1 to 2	At least 4 weeks	
			Dose 1 to 2 At least 4–8 weeks		Dose 2 to 3	At least 4 weeks	
MONOVALENT		Primary series: Monovalent					
edule for Most People Severely Immunocompromised)			CDC weeks <sup>‡</sup>		Dose 1 to 2	At least 4 weeks	
					Dose 2 to 3	At least 4 weeks	
					es: Monovalent		

Dose 2 to 3 At least 4 weeks

Primary series: Monovalent

weeks Dose 1 to 2 At least 4 weeks

Dose 2 to 3 At least 4 weeks

Booster dose: Bivalent
eks (2 months) Dose 3 to 4 At least 8 weeks (2 months)

Primary series: Monovalent



For more specific clinical guidance, see

Authorized in the United States

Interim COVID-19 Immunization Schedule
 Interim Clinical Considerations for Use of

COVID-19 Vaccines Currently Approved or





### **Continuing Education**

0.50 CME / ABIM MOC / CE

# Universal Hepatitis B Vaccination in Adults Aged 19–59 Years: Updated Recommendations of the Advisory Committee on Immunization Practices — United States, 2022

ACIP now recommends hepatitis B vaccines for all adults aged 19 to 59 years, which could ultimately reduce the number of hepatitis B cases.

Authors: Mark K. Weng, MD; Mona Doshani,

MD; Mohammed A. Khan, PhD; Sharon Frey,

MD; Kevin Ault, MD; Kelly L. Moore, MD; Eric W.

Hall, PhD; Rebecca L. Morgan, PhD; Doug

Campos-Outcalt, MD; Carolyn Wester, MD;

Noele P. Nelson, MD, PhD

https://www.medscape.org/viewarticle/976013

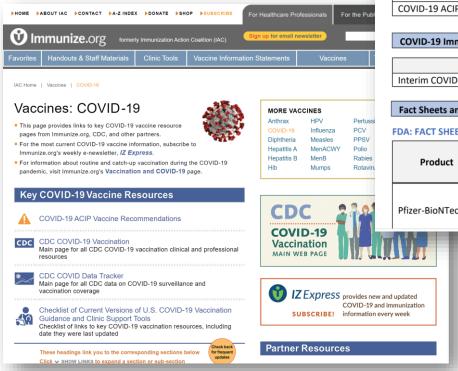


## **VaccineConfident**

## Immunize.org Resources

VaccineConfident

immunize.org/covid-19 immunize.org/express immunize.org/subscribe



### Checklist of Current Versions of U.S. COVID-19 **Vaccination Guidance and Clinic Support Tools**

Information current as of 1 p.m. ET on 26 August 2022

This checklist, which is updated at least mo Updated at least monthly... were last updated (as of the data... accination resources and indicates when they were last updated (as of the date shown above).

- View this checklist online at www.immunize.org/catg.d/p3130.pdf to access the resources directly
- For a comprehensive index of COVID-19 vaccine information, go to www.immunize.org/covid-19

### Primary CDC Guidance on Use of COVID-19 Vaccines

Web page	Date last updated
Use of COVID-19 Vaccines in the United States: Interim Clinical Considerations	22 August 2022
COVID-19 ACIP Vaccine Recommendations	<u>04 August 2022</u>

### COVID-19 Immunization Schedule (print ready PDF document)

Schedule	Date last updated
Interim COVID-19 Immunization Schedule for 6 Months of Age and Older	23 July 2022

### **Fact Sheets and Package Inserts**

### FDA: FACT SHEETS for Vaccines with Emergency Use Authorization (EUA)

		Identifying Colors		Date last updated	
Product	Age Indication	Vial Cap	Label Border	For Healthcare Providers	For Recipients & Caregivers*
Diana BiaNTask	6 months through 4 years	Maroon	Maroon	<u>17 June 2022</u>	28 June 2022
	5 through 11 years	Orange	Orange	17 June 2022	28 June 2022
Pfizer-BioNTech	12+ years	Purple	Purple	08 July 2022	08 July 2022
	42.	^	^	00 1 1 2022	0011 2022



## Open Forum Discussion

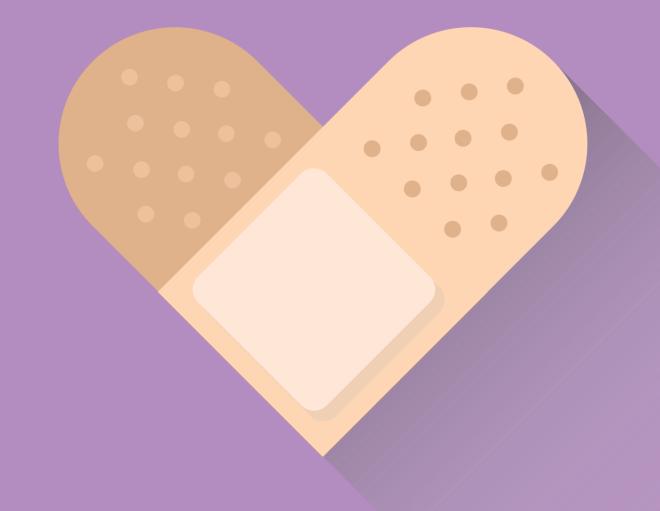
Your Comments, Questions, Feedback





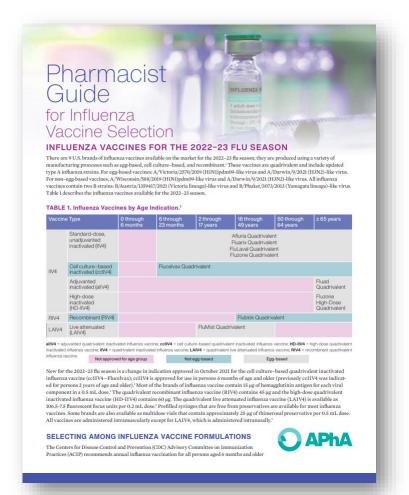
## APhA Update

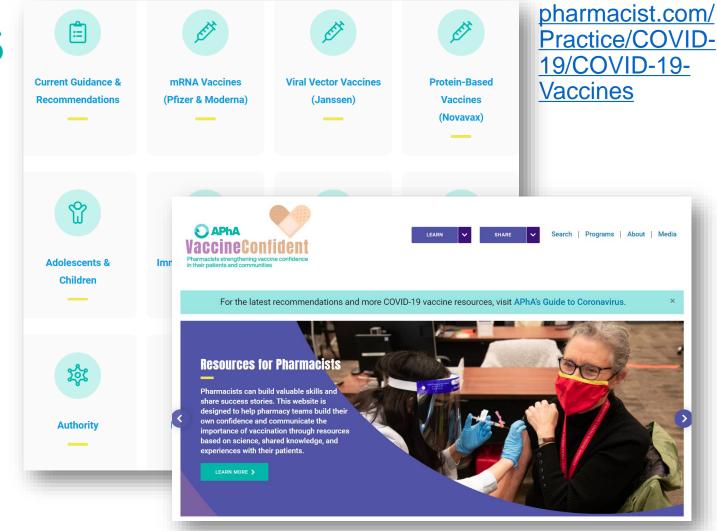
How to Engage & Learn More





## **APhA Resources**





Pharmacist Guide for Influenza Vaccine Selection

vaccineconfident.pharmacist.com







Shared Decision-Making Resource for Healthcare Providers and Patients

In shared decision-making, healthcare providers and patients work together to make the best possible healthcare decisions. These decisions consider fact-based information about available options, the clinician's knowledge and experience, and the patient's values, questions, and preferences.

### STEPS OF SHARED DECISION-MAKING

Seek Your Patient's Participation



Help Your Patient **Explore and Compare** 



**Assess Your Patient's** Values and Preferences



Reach A Decision with Your Patient



**Evaluate Your Patient's** Decision



**Decide Which Resources** Can Support Your Patient



SAMPLE TALKING POINTS

Why do I need a flu vaccine?

What does the flu have to do with my heart?

Flu vaccines can keep you from getting sick with flu. We can discuss the options and choose one that is best for you. What have you heard about flu vaccines?

People with heart problems have higher risks if they get the flu including having a heart attack or stroke. How do you think the vaccine could help you?

Does it matter whether I get a regular or high-dose vaccine?

High-dose flu vaccines have been shown to work better in people 65 years and older.



Flu vaccines cannot cause the flu. They do sometimes cause mild symptoms as the immune system goes into action.

Can I get my flu vaccine with other vaccines?

Flu vaccines can be given at the same time as other vaccines, including the COVID-19 vaccine



You can learn more by talking with your healthcare team, which could include your physician, pharmacist, nurse, nurse practitioner, physician assistant, and dietitian. What questions do you have?

Find this resource and other guides at http://bit.lv/shared-decision-flu & http://bit.lv/shared-decisi











NATIONAL FORUM

















### Shared Decision-Making Guide: Flu Vaccine Considerations

Patient and provider complete this guide together with a copy provided to the patient.

Vaccine received:		
Visit date:		





### Patient Risks:

- ☐ Age 65 or older with or without chronic conditions
- ☐ Under age 65 with chronic conditions such as heart disease (e.g., clogged arteries, heart failure, irregular heartbeat, or heart valve disorders) or a history of stroke
- ☐ Under age 65 with no chronic conditions

Notes:

### STOP. Provider and patient to discuss benefits, risks, and considerations

Age 65 or older with or without chronic conditions

In 2022, the CDC stated a preference for the use of enhanced flu vaccines (including high dose and recombinant) or adjuvanted flu vaccines over standard unadjuvanted flu vaccines for adults 65 years and

Discuss benefits, risks, and

☐ High Dose Flu Vaccine Recombinant Quadrivalent

considerations of

- Flu Vaccine Adjuvanted Flu Vaccine

https://www.cdc.gov/flu/highrisk/65over.htm

Under age 65 with chronic conditions

There are many flu vaccines approved for people that have a long, established safety record in people with heart disease. The CDC recommends that people with some chronic medical conditions should generally NOT get the Live Attenuated Influenza Vaccine (LAIV), given as a nasal spray.

Discuss benefits, risks, and considerations of

- ☐ Standard Unadjuvanted Flu Vaccine
- Quadrivalent Cell-Based Flu Vaccine
- Recombinant Quadrivalent Flu Vaccine

https://www.cdc.gov/flu/highrisk/heartdisease.htm

Under age 65 with no chronic conditions

The CDC recommends use of any licensed, age-appropriate flu vaccine during the 2022-2023 flu season. There are different flu vaccine manufacturers and multiple flu vaccines that are licensed and recommended for use in the United States.

Discuss benefits, risks, and considerations of

- Standard Unadjuvanted Flu Vaccine
- Quadrivalent Cell-Based Flu Vaccine □ Recombinant Quadrivalent
- Flu Vaccine ☐ Live Attenuated Flu Vaccine
- https://www.cdc.gov/flu/prevent/flushot.htm

Developed by the APhA Foundation and the National Forum for Heart Disease and Stroke Prevention

Access the resource here:

www.nationalforum.org/ collaborations/flu/





## ICYMI: Pulse on Practice & Policy



### Pulse On Practice & Policy Open Forum Series

As the voice of pharmacy, APhA's monthly *Pulse on Practice and Policy Open Forum Series* creates a platform where all of pharmacy can come together to share perspectives and be informed of key practices and policies impacting the profession. Please join us each month as we welcome pharmacy leaders who will cover the latest practice and policy topics and what they mean for you, your practice, and your patients.



Register for our upcoming open forum on Thursday, October 13th from 1-2pm ET!





✓ July 14th: Implementing Test to Treat for Paxlovid

✓ June 9th: The New Federal Provider Status Legislation





## The attendance code will be announced on the next slide...

- Be prepared to record the code when it appears
- To obtain CPE credit:
  - 1. After the webinar ends, return to your "My Training" page (<a href="https://apha.docebosaas.com/pages/21/apha-learning-library-home">https://apha.docebosaas.com/pages/21/apha-learning-library-home</a>)
  - 2. Log in using your pharmacist.com username and password
  - Click on the "The Latest Recommendations for COVID-19 and Influenza Vaccinations" session listed in your enrollments
  - 4. Enter the attendance code
  - 5. Complete the evaluation

