



# Shared Clinical Decision-Making Meningococcal B Vaccination

The determination on whether to vaccinate a patient 16-23 years of age who is not at increased risk for meningococcal disease with a MenB vaccine is based on a shared clinical decision-making process between a patient and their health care provider. However, all adolescents and young adults at increased risk because of a serogroup B meningococcal disease outbreak or certain medical conditions should receive a MenB vaccine. Shared clinical decision-making recommendations are intended to be flexible and informed by the characteristics, values, and preferences of the individual patient and the clinical discretion of the health care provider.

Consider discussing MenB vaccination with patients 16 through 23 years of age who are not at increased risk for meningococcal disease:

<b>Remember:</b> 	<ul style="list-style-type: none"><li>• MenB vaccine is not routinely recommended for all adolescents in this age group.</li><li>• The vaccine series provides short-term protection against most strains of serogroup B meningococcal bacteria circulating in the United States.</li></ul>
<b>Consider:</b> 	<ul style="list-style-type: none"><li>• Serogroup B meningococcal disease is an uncommon but deadly disease. In recent years, between 20 and 50 cases occurred in 16 to 23 year olds in the United States each year.</li><li>• A low risk of exposure or infection does not mean a person cannot get a MenB vaccine. It is just one potentially important consideration in shared clinical decision-making.</li><li>• College students are at increased risk, especially those who are freshmen, attend a four-year university, live in on-campus housing, or participate in sororities and fraternities.</li><li>• Serogroup B vaccines are safe and effective, but only offer short-term protection (1 to 2 years) to those who get vaccinated.</li></ul>
<b>If you vaccinate:</b> 	<ul style="list-style-type: none"><li>• Since these patients are not at increased risk of serogroup B disease, administer:<ul style="list-style-type: none"><li>- 2-dose series of MenB-4C at least 1 month apart, or</li><li>- 2-dose series of MenB-FHbp at 0, 6 months</li></ul></li><li>• MenB-4C and MenB-FHbp are not interchangeable</li><li>• MenB vaccines are safe and effective for this population unless a patient<ul style="list-style-type: none"><li>- Had a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a vaccine component</li><li>- Is pregnant; vaccine should be delayed unless the patient is at increased risk and the benefits of vaccination outweigh the potential risks</li></ul></li></ul>

#### Additional information:

CDC Child and Adolescent Immunization Schedule:  
[www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html](http://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html)

CDC Adult Immunization Schedule:  
[www.cdc.gov/vaccines/schedules/hcp/imz/adult.html](http://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html)

CDC Meningococcal B Disease and Vaccine Information:  
[www.cdc.gov/vaccines/vpd/mening/hcp/index.html](http://www.cdc.gov/vaccines/vpd/mening/hcp/index.html)

ACIP/CDC Meningococcal B Recommendations:  
[www.cdc.gov/mmwr/volumes/66/wr/mm6619a6.htm](http://www.cdc.gov/mmwr/volumes/66/wr/mm6619a6.htm)



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