

Important Content Update Message

We are currently updating the OP Help Center content for OP 20. We appreciate your patience as we continue to make these updates. To locate the version of your software, navigate to: **Help tab > About**

MenB-FHbp Vaccine Recommendation

Last Modified on 09/15/2020 4:24 pm EDT

Version 14.19

Overview

The information on this page will discuss forecasting and recalls based on when the 2nd dose of MenB-FHbp vaccine was given in compliance with ACIP guidelines.



Note: There are two MenB vaccines that are licensed in the United States: MenB-FHbp and MenB-4C. This article addresses MenB-FHbp. Recommendations regarding use of MenB-4C (Bexsero) are unchanged.

ACIP Recommendations

Important Notice:

As you should be aware, ACIP uses the **GRADE** approach when deciding which vaccines to recommend. Category A vaccines are those that are recommended routinely for all eligible patients. Category B vaccines are those in which recommendations are for individual patients based on clinical decision making. Office Practicum's Vaccine Logic routinely recommends vaccines that are in Category A.



Since **Meningococcal B Vaccine falls in the Category B recommendation** Office Practicum **does not routinely forecast Meningococcal B for adolescents**. Per the CDC: "After reviewing the available data, including the result of the **GRADE analysis**, the Advisory Committee on Immunization Practices (ACIP) recommended that adolescents and young adults aged 16 through 23 years **may be** vaccinated with a MenB vaccine to provide short term protection against most strains of serogroup B meningococcal disease. The preferred age for MenB vaccination is 16 through 18 years of age (recommendation Category B). Category B recommendations are made **for individual clinical decision making**"

If a provider chooses to recommend Meningococcal B vaccine for an individual patient based on clinical decision making, OP will forecast the second dose at the appropriate interval provided the vaccines are **named according to best practices**. Similarly, there are clinical conditions for which the Meningococcal B vaccine is recommended at younger ages. If the provider feels that vaccination with Meningococcal B vaccine is appropriate in a younger child, OP will forecast the appropriate follow-up dosing.

The below recommendations are regarding use of the 2 and 3 dose schedules of MenB-FHbp vaccine (Trumenba):

Persons Aged ≥ 10 Years at Increased Risk for Serogroup B Meningococcal Disease (Category A Recommendation)

For persons at increased risk for meningococcal disease and for use during serogroup B meningococcal disease outbreaks, **3 doses** of MenB-FHbp should be administered at **0 months, 1–2 months, and 6 months** to provide earlier protection and maximize short-term immunogenicity.



Note: If the second dose of the MenB-FHbp vaccine is administered six months or later after the first dose was administered, then a third dose should not be administered to the patient.

Adolescents and Young Adults Aged 16–23 Years (Category B Recommendation)

When given to healthy adolescents who are not at increased risk for meningococcal disease **2 doses** of MenB-FHbp should be administered at **0** and **6** months.



Note: If a second dose of the MenB-FHbp vaccine is administered earlier than six months after the first dose was administered, then a third dose should be administered at least four months after the second dose.

Dosage and Administration

- For intramuscular use only
- Three-dose schedule: Administer a dose (0.5 mL) at 0, 1-2, and 6 months.
- Two-dose schedule: Administer a dose (0.5 mL) at 0 and 6 months. If the second dose is administered earlier than 6 months after the first dose, a third dose should be administered at least 4 months after the second dose.
- The choice of dosing schedule may depend on the risk of exposure and the patient's susceptibility to meningococcal serogroup B disease.

How the Series will Register in the OP Software

The series will be marked complete in the OP software after the two or three doses of MenB-FHbp vaccine are administered to the patient based on the specified period mentioned in the guidelines above.

Resources

- [Package Insert - TRUMENBA](#)
- [CDC MMWR for use of MenB-FHbp](#)

Version 14.10

Overview

The information on this page will discuss forecasting and recalls based on when the 2nd dose of MenB-FHbp vaccine was given in compliance with ACIP guidelines.



Note: There are two MenB vaccines that are licensed in the United States: MenB-FHbp and MenB-4C. This article addresses MenB-FHbp. Recommendations regarding use of MenB-4C (Bexsero) are unchanged.

ACIP Recommendations

These recommendations are regarding use of the 2 and 3 dose schedules of MenB-FHbp vaccine (Trumenba):

Persons Aged ≥ 10 Years at Increased Risk for Serogroup B Meningococcal Disease (Category A Recommendation)

For persons at increased risk for meningococcal disease and for use during serogroup B meningococcal disease outbreaks **3 doses** of MenB-FHbp should be administered at **0** months, **1–2** months, and **6** months to provide earlier protection and maximize short-term immunogenicity.



Note: If the **second dose** of the MenB-FHbp vaccine is administered **six months or later** after the first dose was administered, **then a third dose should not be administered to the patient.**

Adolescents and Young Adults Aged 16–23 Years (Category B Recommendation)

When given to healthy adolescents who are not at increased risk for meningococcal disease **2 doses** of MenB-FHbp should be administered at **0** and **6** months.



Note: If a **second dose** of the MenB-FHbp vaccine is administered **earlier than six months** after the first dose was administered, **then a third dose should be administered at least four months after the second dose**.

Dosage and Administration

- For intramuscular use only
- Three-dose schedule: Administer a dose (0.5 mL) at 0, 1-2, and 6 months.
- Two-dose schedule: Administer a dose (0.5 mL) at 0 and 6 months. If the second dose is administered earlier than 6 months after the first dose, a third dose should be administered at least 4 months after the second dose.
- The choice of dosing schedule may depend on the risk of exposure and the patient's susceptibility to meningococcal serogroup B disease.

How the Series will Register in the OP Software

The series will be marked complete in the OP software after the two or three doses of MenB-FHbp vaccine are administered to the patient based on the specified period mentioned in the guidelines above.

Resources

- [Package Insert - TRUMENBA](#)
- [CDC MMWR for use of MenB-FHbp](#)

Version 14.8

There is no change to version 14.8. We recommend you still follow the guidelines indicated in tab 14.9.