

Meningococcal Conjugate Vaccine (MenACWY)

Pathophysiology	Bacteria Direct contact with large droplet respiratory secretions transmission Incubation 3-7 days
Vaccine Description	Inactivated conjugate vaccine, containing <i>N. meningitidis</i> serogroups A, C, Y, and W-135 Menactra® Minimum age 9 months Menveo® Minimum age 2 months bivalent meningococcal conjugate vaccine and Haemophilus influenza type b conjugate vaccine Hib-MenACWY approved for use in ages 6 weeks through 18 months Menveo® Newly licensed Menveo one-vial (all liquid) formulation should not be administered before age 10 years MenQuadfi® Minimum age 2 years
Dose & Route	0.5 mL given IM
Administration Schedule/Dose	Routine: 2-dose series at 11-12 years, 16 years Catch-up: Age 13-15 years 1-dose now and booster at age 16-18 years (minimum interval 8 weeks) Age 16-18 years: 1-dose
Special Populations For booster doses among persons with high-risk conditions refer to www.cdc.gov/mmwr/volumes/69/rr/rr6909a1.htm	<ul style="list-style-type: none"> • Anatomical or functional asplenia (including sickle cell disease) • HIV infection • Persistent complement component deficiency • Complement Inhibitor • Eculizumab or Ravulizumab use • Travel to or live in countries where meningococcal disease is hyperendemic or epidemic meningococcal disease, including countries in the African meningitis belt or during Hajj • At risk from a meningococcal disease outbreak attributed to serogroup A, C, W, or Y • Microbiologists routinely exposed to <i>Neisseria meningitidis</i>

Special Instructions

- MenACWY may be administered during pregnancy if indicated.
- Because vaccinees may develop syncope, sometimes resulting in falling with injury, observation for 15 minutes after administration is recommended. If syncope develops, patients should be observed until the symptoms resolve.
- Menactra should be administered either before or at the same time as DTaP.