

Meningococcal Vaccine Recommendations by Age and Risk Factor for Serogroups A, C, W, or Y Protection

A separate vaccine is needed for protection against meningococcal serogroup B disease.

MenACWY = Menactra (sanofi) and Menveo (Novartis)
 MenACWY-D = Menactra Hib-MenCY = MenHibrix (GlaxoSmithKline)
 MenACWY-CRM = Menveo MPSV = Menomune (sanofi)

Routine Recommendations for Quadrivalent Meningococcal Conjugate Vaccine (MenACWY)

For preteens age 11 through 12 years	Give dose #1 of 2-dose MenACWY series. ¹ (Dose #2 will be due at age 16 years.)
For teens age 13 through 15 years	Give catch-up dose #1 of 2-dose MenACWY series. (Dose #2 will be due at age 16 years.)
For teens age 16 through 18 years	Give dose #2 of MenACWY. Separate from dose #1 by at least 8 weeks.
Catch-up for teens age 16 through 18 years	If no history of prior vaccination with MenACWY, give 1 dose of MenACWY.
For first year college students, age 19 through 21 years, living in residence halls	If no history of prior vaccination with MenACWY, give 1 dose of MenACWY. ¹ If history of 1 dose of MenACWY given when younger than age 16 years, give dose #2 of MenACWY. ²

Risk-based Recommendations for Persons with Underlying Medical Conditions or Other Risk Factors

TARGETED GROUP BY AGE AND/OR RISK FACTOR	PRIMARY DOSE(S)	BOOSTER DOSE(S)
Travelers to or residents of countries where meningococcal disease is hyperendemic or epidemic,³ people present during outbreaks caused by a vaccine serogroup,⁴ and other people with prolonged increased risk for exposure (e.g., microbiologists routinely working with <i>Neisseria meningitidis</i>)		
For children age 2 through 18 months	Give MenACWY-CRM at ages 2, 4, 6 and 12–15 months. ⁵	If risk continues, give initial booster after 3 years followed by boosters every 5 years.
For children age 7 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses, separated by 3 months, ⁶ of MenACWY-CRM (if age 7–23 months) ⁷ or MenACWY-D (if age 9–23 months).	
For age 2 through 55 years	Give 1 dose of MenACWY. ¹	Boost every 5 years with MenACWY. ^{8,9}
For age 56 years and older	If no previous MenACWY dose and either short-term travel or outbreak-related, give 1 dose of MPSV; all others, give 1 dose of MenACWY.	Boost every 5 years with MenACWY. ⁹
People with persistent complement component deficiencies¹⁰		
For age 2 through 18 months	Give MenACWY-CRM or Hib-MenCY at ages 2, 4, 6 and 12–15 months	Give MenACWY booster after 3 years followed by boosters every 5 years thereafter.
For children age 7 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses, separated by 3 months, of MenACWY-CRM (if age 7–23 months) ⁷ or MenACWY-D (if age 9–23 months).	
For ages 2 through 55 years	Give 2 doses of MenACWY, 2 months apart.	Boost every 5 years with MenACWY. ^{8,11}
For age 56 years and older	Give 2 doses of MenACWY, 2 months apart.	Boost every 5 years with MenACWY. ¹¹
People with functional or anatomic asplenia, including sickle cell disease		
For children age 2 through 18 months	Give MenACWY-CRM or Hib-MenCY at ages 2, 4, 6 and 12–15 months.	Give MenACWY booster after 3 years followed by boosters every 5 years thereafter.
For children age 19 through 23 months who have not initiated a series of MenACWY-CRM or Hib-MenCY	Give 2 doses of MenACWY-CRM, 3 months apart.	
For children age 2 through 55 years	Give 2 doses of MenACWY, 2 months apart. ¹²	Boost every 5 years with MenACWY. ^{8,11}
For age 56 years and older	Give 2 doses of MenACWY, 2 months apart.	Boost every 5 years with MenACWY. ¹¹

FOOTNOTES

1. If the person is HIV-positive, give 2 doses, 2 months apart.
2. The minimum interval between doses of MenACWY is 8 weeks.
3. Prior receipt of Hib-MenCY is not sufficient for children traveling to the Hajj or African meningitis belt as it doesn't provide protection against serogroups A or W.
4. Seek advice of local public health authorities to determine if vaccination is recommended.
5. Children ages 2 through 18 months who are present during outbreaks caused by serogroups C or Y may be given an age-appropriate series of Hib-MenCY.
6. If a child age 7 through 23 months will enter an endemic area in less than 3 months, give doses as close as 2 months apart.
7. If using MenACWY-CRM, dose 2 should be given no younger than age 12 months.
8. If primary dose(s) given when younger than age 7 years, give initial booster after 3 years, followed by boosters every 5 years.
9. Booster doses are recommended if the person remains at increased risk.
10. Persistent complement component deficiencies include C3, C5–C9, properdin, factor H, and factor D.
11. If the person received a 1-dose primary series, give booster at the earliest opportunity, then boost every 5 years.
12. Children with functional or anatomic asplenia should complete an age-appropriate series of PCV13 vaccine before vaccination with MenACWY-D; MenACWY-D should be given at least 4 weeks following last dose of PCV13. MenACWY-CRM or Hib-MenCY may be given at any time before or after PCV13.

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