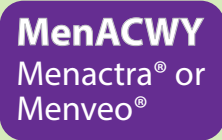
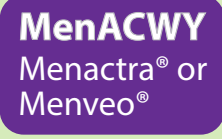
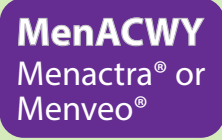


# Meningococcal Vaccine Timing

MenACWY (MCV4) and MenB vaccines each protect against different serogroups. They may be given at the same visit.

For high-risk populations (increased exposure to meningococcal disease, HIV infection, complement deficiencies or, asplenia), see recommendations at [EZIZ.org/assets/docs/IMM-1218.pdf](http://EZIZ.org/assets/docs/IMM-1218.pdf)

Routine	As needed to provide short-term protection against most strains of serogroup B meningococcal disease
<p><b>All 11-12 years<sup>1,2</sup></b></p> 	<p><b>16-23 years</b> (Preferred age is 16–18 years)</p> <p><b>1st dose</b> <b>MenB</b> Bexsero®</p> <p>1 month →</p> <p><b>2nd dose</b> <b>MenB</b> Bexsero®</p> <p>Use the same brand of MenB vaccine for each dose in the series.</p> <p>OR</p> <p><b>1st dose</b> <b>MenB</b> Trumenba®</p> <p>1–2 months<sup>4</sup> →</p> <p><b>2nd dose<sup>4</sup></b> <b>MenB<sup>4</sup></b> Trumenba®</p> <p>6 months between 1st and last dose →</p> <p><b>3rd dose</b> <b>MenB</b> Trumenba®</p>
<p><b>All 16 years<sup>2,3</sup></b></p> <p>Booster dose</p> 	
<p><b>Catch-up</b> for first-year college students 19–21 years of age if</p> <ul style="list-style-type: none"> <li>• No prior vaccination OR</li> <li>• Received 1st dose when younger than 16 years</li> </ul> 	

**Notes:**

1. HIV-infected persons are recommended to receive 2 MenACWY (MCV4) doses, 2 months apart as the primary series if not yet immunized before age 11-12 years.
2. MenACWY (MCV4) vaccines protect against serogroups A, C, W-135, and Y.
3. If the first dose of MenACWY (MCV4) is given at age 16 years, no booster dose is needed.
4. Also licensed for optional two-dose schedule given at 0 and 6 months. The choice of dosing schedule may depend on the risk of exposure and the patient's susceptibility to serogroup B disease.

For further details, see: [www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html](http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/mening.html).



California Department of Public Health,  
Immunization Branch  
This publication was supported by Grant  
Number H23/CCH922507 from the Centers  
for Disease Control and Prevention (CDC)