

ProQuad® (MMRV)

Indications for Use and Schedule <u>Routine Schedule:</u> • Approved for use among healthy children aged 12 months through 12 years; MMRV should not be administered to persons 13 years or older • 1 st Dose routinely recommended at age 12-15 months and 2 nd Dose routinely recommended at age 4-6 years <u>Make sure minimum age and minimum intervals are met</u> : Minimum age for dose 1 in 12 months of age	 Vaccine Administration Subcutaneous (SC) injection in the upper arm or the outer aspect of the thigh 5/8 inch needle; 23-25 gauge (all ages) Can be given with other vaccines, at the same visit (Use separate sites; space at least 1 inch apart)
 Minimum age for dose 1 is 12 months of age Second dose may be administered before age 4 years, provided ≥ 3 months have elapsed since the first dose <u>"Live/Live Vaccine Rule":</u> MMRV vaccine may be administered at any time Before or after an inactivated vaccine but at least 28 days before or after another live, attenuated vaccine, except varicella vaccine, for which a minimum interval of 3 months is recommended 	Storage and Handling • Store in the freezer: -58°F and +5°F (-50°C to -15° C) • Diluent may be stored at refrigerator temperature or room temperature; reconstitute using the Merck diluent only • Keep in the original box • Protect from light
 EVIDENCE OF MMR IMMUNITY Documentation of age-appropriate vaccination Preschool-aged children 12 months of age or older: 1 dose School-aged children through 18 years of age: 2 doses Adults born in 1957 or later: 1 dose Adults born in 1957 or later at higher risk: 2 doses Adults born in 1957 or later at higher risk: 2 doses Health Care Personnel (HCP), international travelers, college students Persons born in 1956 or earlier (unless pregnant or HCP) Lab evidence of immunity to measles, mumps and rubella CONTRAINDICATIONS History of anaphylactic reaction to neomycin; allergic reaction to gelatin, other component of the vaccine, or after previous Vaccination with MMRV vaccine, varicella vaccine or MMR vaccine Altered immunity (i.e., blood dyscrasias, leukemia, lymphomas of any type, or other malignant neoplasms affecting bone Marrow or lymphatic system Primary or acquired immunodeficiency including HIV infections/AIDS, cellular immune deficiencies, hypogammaglobulinemia, 	
 And dysgammaglobulinemia Family history of congenital or hereditary immunodeficiencies, unless the immune competence of the potential vaccine Recipient has been demonstrated Systemic immunosuppressive therapy, including oral steroids ≥ 2mg/kg of body weight or ≥20 mg/day of prednisone or Equivalent for persons who weigh > 10kg, when administered for ≥ 2 weeks Pregnancy <u>PRECAUTIONS</u> 	
 Recent (≤ 11 months) receipt of antibody-containing blood product (specific interval depends on dose administered) History of thrombocytopenia or thrombocytopenic pupura Moderate or severe acute illness with or without fever A personal or family (i.e., sibling or parent) history of seizures or any etiology[*] <u>FURTHER POINTS</u> TB skin testing (TST): May give MMRV & TST on same day and read TST 48-72 hrs later. However, if the MMRV vaccine 	
 was given recently, delay TST at least 4 weeks after the vaccination to ensure the TST reading is not affected by the vaccine. If TST is done first (not on the same day as MMRV is given) delay vaccination until the TST is read. Parents and caregivers should be counseled about the possibility of fever after receipt of a measles-containing vaccine and Educated on timing and measures to control it Breastfeeding is not a contraindication to MMRV vaccination in either the mom or the infant MMPV Vaccine Information Statement (VIS) is queilable at http://www.immuniag.org/wig(

• MMRV Vaccine Information Statement (VIS) is available at <u>http://www.immunize.org/vis/</u> For additional information, refer *MMWR* "Use of Combination Measles, Mumps, Rubella and Varicella Vaccine", Recommendations of the Advisory Committee on Immunization Practices; *MMWR*, May 7, 2010/Vol. 59/No. RR-3.www.cdc.gov/*MMWR*