







# Sickle Cell Health Maintenance Guidelines

Age	Visits	Labs	Penicillin Prophylaxis	Additional Immunizations	Screenings
<b>0 - 6 months</b> 	Every 2 months w/ PCP; Hematology every 3 months	CBC w/diff and retic each visit; Confirmatory hemoglobinopathy panel at first visit	Begin 125 mg po bid at diagnosis	All standard immunizations <b>- PCV13 series is essential!</b> <b>PLUS:</b> *Begin MCV4 series if using <u>Menveo</u> 4-dose series at 2, 4, 6, and 12 months	Standard practice
<b>7 months – 12 months</b> 	Every 3 months w/ PCP; Hematology every 3 months	CBC w/diff, retic each visit; hemoglobinopathy panel after 6 months of age	125 mg po bid	All standard immunizations <b>- PCV13 series is essential!</b> - Flu vaccine <b>PLUS:</b> *Begin MCV4 series if <u>not previously given</u> and if using <u>Menveo</u> – see instructions below*	Neurodevelopmental screening
<b>1 - 2 years</b> 	Every 3 months w/ PCP; Hematology every 3-6 months Pulse ox checks	CBC w/diff and retic each visit; iron studies, CMP, lead level, urinalysis	125 mg po bid	All standard immunizations - Flu vaccine <b>PLUS:</b> *continue MCV4 series if using Menveo starting a 7-12 mos of age*	- Neurodevelopmental screening - Dental exams every 6 months
<b>2 - 5 years</b> 	Every 6 months w/ PCP; Hematology every 6 months Pulse ox checks	CBC w/diff and retic each visit; CMP, urinalysis annually	At 3 years, Penicillin increased to 250 mg po bid.	All standard immunizations - Flu vaccine - PPSV23 at 2 years is essential! <b>PLUS:</b> * Give MCV4 <u>Menquadfi</u> at <u>2 years</u> if MCV4 not already given & a booster 8 weeks later	<b>Transcranial Doppler studies (TCD) yearly for 2-16 years old to assess stroke risk for Hgb SS &amp; S-Beta null thalassemia</b> - Neurodevelopmental screening - Dental exams every 6 months
<b>Over 5 years</b> 	PCP every 6 -12 months; Hematology at least annually Pulse ox checks	CBC w/diff and retic each visit; CMP, urinalysis annually	Consult with hematology	All standard immunizations <b>PLUS:</b> - Flu vaccine <b>- PPSV23 booster at 5 years old essential!</b> - MCV4 booster at 4-5 years old (3 years after completion of primary series)	<b>- TCD yearly for 2-16-year-old to assess stroke risk for Hgb SS &amp; S-Beta null thalassemia</b> - Yearly retinal exams and urinary microalbumin starting at age 10. - Dental exams every 6 months
<b>Adolescence</b> 	PCP yearly; Hematology at least annually. Pulse ox checks <b>Develop a transition plan.</b>	CBC w/diff and retic each visit; CMP, urinalysis annually; ferritin at least once	Consult with hematology	All standard immunizations <b>PLUS:</b> - Flu vaccine - MCV4 booster every 5 years - MenB at 10 years old	- TCD yearly for 2-16-year-old to assess stroke risk for Hgb SS & S-Beta null thalassemia - Yearly retinal exams and urinary microalbumin. - Dental exams every 6 months

# IMMUNIZATION GUIDELINES

**\*Meningococcal ACWY** – there are different meningococcal vaccine options that available and approved for starting at different ages.

- If primary series/dose given before 6 years old, repeat booster after 3 years and every 5 years thereafter.
- If primary series/dose given at 7+ years old, give a booster 5 years thereafter.
- Menveo
  - + If initiating vaccination at 2 months of age, administer as a 4-dose series at 2, 4, 6, and 12 months of age.
  - + If initiating vaccination at 7 months through 23 months of age, administer as a 2-dose series with the second dose administered after the 1st birthday and at least 3 months after the first dose.
  - + In children >2 years old, administer as 2-dose series 8 weeks apart.
- Menquadfi
  - + For children 2 years old and older.
  - + 2-dose series, 8 weeks apart.
  - + If primary series is given before 6 years old, give booster after 3 years, and every 5 years thereafter.
  - + If primary series is given at 7+ years old, give every 5 years thereafter.
  - + Do not give at the same time as PCV13. Give at least 4 weeks after the completion of all PCV13 doses.

**Meningococcal B** – starting at 10 years old

- Bexsero – 2 dose series, 4 weeks apart.
- Trumenba – 3 dose series, first dose followed by second dose 1-2 months later, third dose 6 months after the second dose.

**Pneumococcal Conjugate (PCV13) & Pneumococcal Polysaccharide (PPSV23)**

- Routine 4-dose PCV13 series at 2, 4, 6 & 12-15 months.
- PCV13 and PPSV23 should not be given on the same day.
- All PCV13 should be administer before PPSV23, if possible.
- Age 2-5 years  
Any incomplete series with:
  - + 3 PCV doses: give 1 dose of PCV13 at least 8 weeks after previous PCV13 doses.
  - + Fewer than 3 PCV doses: give 2 PCV13 doses (all PCV13 doses 8 weeks apart).
  - + Give PPSV23 as soon as possible after age 2 and at least 8 weeks after PCV13. Repeat in 3 years.
  - + No history of PPSV23: 1 dose of PPSV23 at 2 years of age (at least 8 weeks after completing all PCV13 doses) & a second dose of PPSV23 3 years later.
- Age 6-18 years
  - + No history of PCV13 or PPSV23: give 1 dose of PCV13 followed by PPSV23 at least 8 weeks later. Second dose of PPSV23 should be administered in 5 years.
  - + History of partial PCV13 but no PPSV23: give 2 doses of PPSV23 starting at 8 weeks after the past PCV13. PPSV23 doses should be 5 years apart.
  - + History of PPSV23 but no PCV13: give 1 dose of PCV13 at least 8 weeks after the most recent PPSV23. Give a second dose of PPSV23 at least 5 years after the first dose and 8 weeks after the PCV13.

**Hib** - One dose of Hib vaccine for people aged >5 years if they have not previously received Hib.

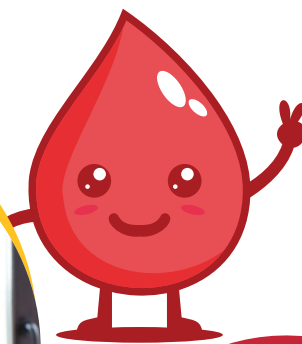
**COVID-19** vaccinations are recommended.

## References

Centers for Disease Control and Prevention. (2023). *Child and Adolescent Immunization Schedule by Medical Indication*.

Retrieved from <https://www.cdc.gov/vaccines/schedules/hcp/imz/child-indications.html#note-pneumo>

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