









Health Maintenance Guidelines for Children with Sickle Cell Disease

Due to the availability of immunizations in our country the childhood diseases that are preventable by vaccination is no longer presenting an issue. It is very **important** that you keep your child safe and healthy by following the enclosed Sickle Cell Disease Health Maintenance Guidelines. In addition, because your child has Sickle Cell Disease there are a few extra vaccines that will be given to keep your child in a healthy state. Keep this guideline in a place that will remind you of what is due at each doctor visit.

Sickle Cell Health Maintenance Guidelines

Age	Visits	Labs	Penicillin	<u>ADDITIONAL Immunizations</u>	Screenings
0-6 months 	Every 2 months; hematology consult	CBC with diff and retic count each visit	At 2 months start 125 mg po bid	All standard immunizations. PCV essential *Begin MCV4 series (2, 4, 6, 12 months)	Standard practice
7 months – 12 months 	Every 3 months plus hematology at least annually	CBC with diff and retic count each visit; percent HbF every 6 months	Continue 125 mg po bid	All standard immunizations PLUS: - Flu vaccine - Complete MCV4 series	Standard practice – dental and developmental included.
12 months – 24 months 	Every 3 months plus hematology at least annually	CBC with diff and retic count each visit; percent HbF and pulse ox every 6 months; BUN, creatinine, urinalysis, LFT's annually	Continue 125 mg po bid	All standard immunizations PLUS: - Flu yearly - PPSV - MCV4 in not already given	Standard practice – dental and developmental included. 
25 months - 5 years 	Every 6 months plus hematology at least annually	CBC with diff, retic count and pulse ox each visit; urinalysis, BUN, creatinine and LFT's, and HbF* annually	At 3 years, Penicillin increased to 250 mg po bid.	All standard immunizations PLUS: - Flu yearly - PPSV - MCV4 at 2 - 5 years if not already given	Standard practice PLUS: - Transcranial Doppler studies (TCD) at least yearly from 2 to 16 years of age to prevent stroke for Hgb SS or S-Beta thalassemia zero
Over 5 years 	Every 6 -12 months plus hematology at least annually	CBC with diff, retic count and pulse ox every 6 months; urinalysis, BUN, creatinine and LFT's, HbF* annually	Consult with hematology 	All standard immunizations PLUS: - Flu yearly - PPSV booster 5 yrs after first dose - MCV4 booster 5 years after 2 dose series complete	Standard practice PLUS: - TCD at least yearly from 2 to 16 years of age to prevent stroke for Hgb SS or S-Beta thalassemia zero - Yearly retinal exams starting at age 10.
Adolescence 	Yearly plus hematology at least annually. Develop transition plan.	CBC with diff, retic count and pulse ox every 6 months; urinalysis, BUN, creatinine and LFT's, HbF* annually	Consult with hematology	All standard immunizations PLUS: - Flu yearly - MCV4 booster every 5 years	Standard practice PLUS: - TCD at least yearly from 2 to 16 years of age to prevent stroke for Hgb SS or S-Beta thalassemia zero - Yearly retinal exams

Office for Genetics and People with Special Health Care Needs

Reference: Sickle Cell Advisory Committee of the Genetic Network of New York, Puerto Rico and the Virgin Islands. **Guidelines for the Treatment of People with Sickle Cell Disease.** 2015; and personal communication from Dr. James Casella, Pediatrics and Oncology, Chief, Division of Pediatric Hematology, Johns Hopkins University.

*Children with anatomic or functional asplenia (including sickle cell disease): 1. Menveo o Children who initiate vaccination at 8 weeks through 6 months: Administer doses at 2, 4, 6, and 12 months of age. o Unvaccinated children 7 through 23 months: Administer 2 doses, with the second dose at least 12 weeks after the first dose AND after the first birthday. o Children 24 months and older who have not received a complete series: Administer 2 primary doses at least 8 weeks apart. 2. MenHibrix o Children 6 weeks through 18 months: Administer doses at 2, 4, 6, and 12 through 15 months of age. o If the first dose of MenHibrix is given at or after 12 months of age, a total of 2 doses should be given at least 8 weeks apart to ensure protection against serogroups C and Y meningococcal disease. 3. Menactra o Children 24 months and older who have not received a complete series: Administer 2 primary doses at least 8 weeks apart. If Menactra is administered to a child with asplenia (including sickle cell disease), do not administer Menactra until 2 years of age and at least 4 weeks after the completion of all PCV13