



VACCINE ADVISORY COMMITTEE
VIRTUAL MEETING
October 9th, 2025

Time	Agenda Item	Facilitator
10:30 – 10:35	Welcome, Announcements, and Land Acknowledgement	Tao Sheng Kwan-Gett
10:35 – 10:45	Roll Call and Conflict of Interest Declaration	Adriann Jones
10:45 – 10:50	Approval of Last Meeting Minutes	Tao Sheng Kwan-Gett
10:50 – 11:00	Public Comment	Teri Maitri
11:00 – 11:30	Office of Immunization Leadership Updates	Jamilia Sherls
11:30 – 11:50	WA RSV Impact Analysis	Julia Bennett
11:50 – 12:00	BREAK	Adriann Jones
12:00 - 12:10	DOH's Vaccine Guidance Discussion: MMRV & CVOID-19	Tao Sheng Kwan-Gett
12:10 - 12:55	VAC Member Report Out and Discussion	VAC Members
12:55 – 1:00	Adjourn	Tao Sheng Kwan-Gett

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CONFLICT OF INTEREST

Decisions made by committee members should always be based solely on the best interest of the department and the people of Washington State. Decisions should not be influenced by personal financial interest or by other extraneous considerations. Any affiliation with an organization having fundamental goals that conflict with the department and VAC mission should be avoided. Any current, previous (within two years), or future potential conflict of interest should be disclosed at the beginning of each VAC meeting.

A potential conflict of interest exists when a committee member has a relationship or engages in any activity or has any personal financial interest which might impair their independence or judgment or inappropriately influence their decisions or actions concerning VAC matters.

A potential conflict of interest exists and should be disclosed if the committee member:

- Has a relationship with an entity that benefits financially from the sale of vaccines, such as a consultancy, serving on a speaker's bureau, receiving honoraria, research and/or travel support.
- Owns a material financial interest in any business that provides or seeks to provide goods or services to the department.
- Serves as an officer or participates on the board or committees of other related professional societies that receive direct financial benefit from the sale of vaccines.
- Has an affiliation with an organization that has a financial interest in VAC recommendations.
- Has an affiliation with an organization that has a competing activity.

Each committee member has a high duty and obligation to disclose to the entire committee any potential conflict of interest and to abstain from any decision where a significant conflict of interest exists. Ultimately, it is the responsibility of the entire committee to determine what, if any, limitations on activities with regard to the committee member's conflict are required to protect the VAC.

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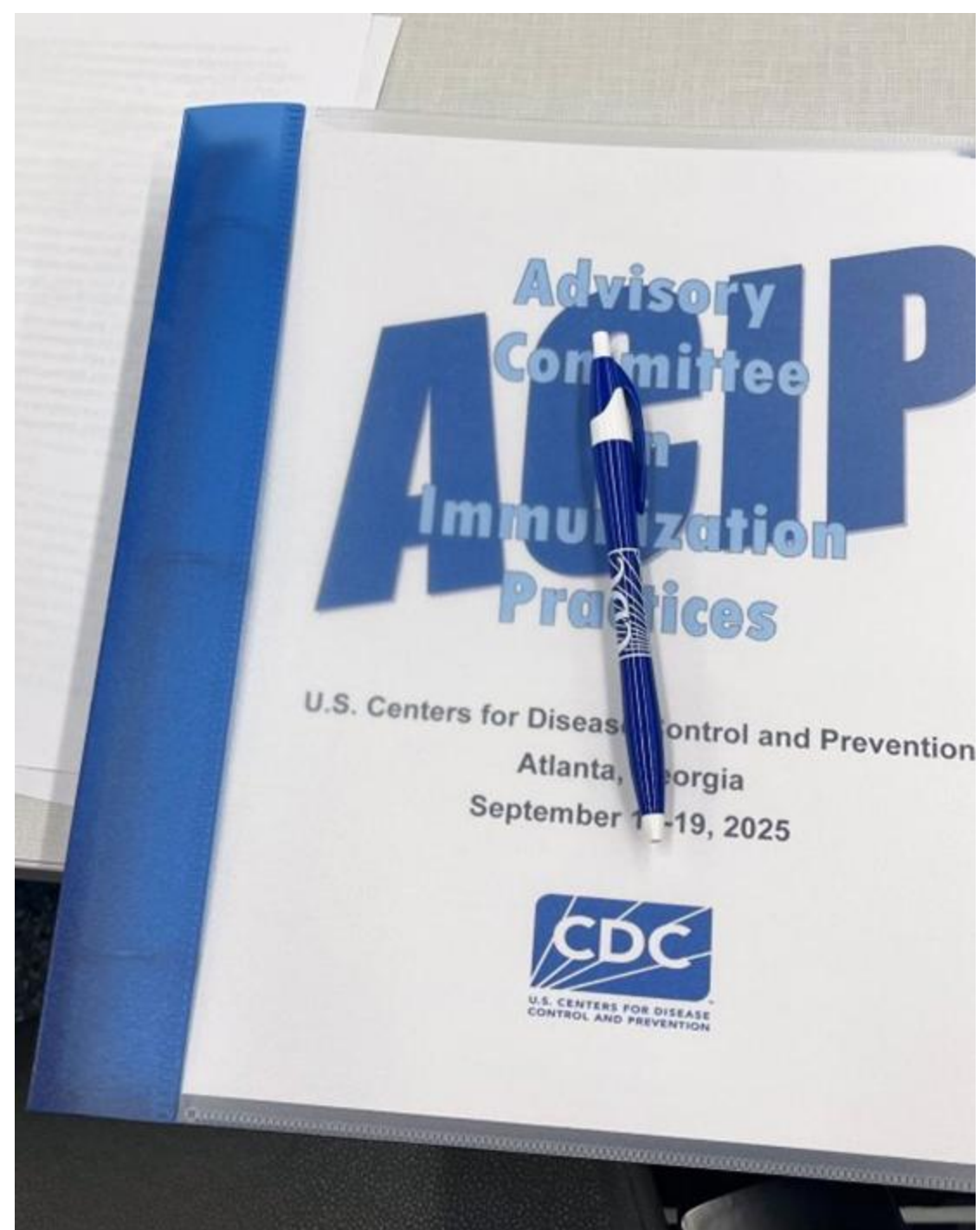
Leadership Update

- Jamilya Sherls, DNP, MPH, RN, CPN, CDP

- ACIP meeting summary - MMRV, Hepatitis B, COVID-19
- DOH Recommendations
 - DOH COVID-19 Standing Order
 - West Coast Health Alliance
- Respiratory Immunization Data Dashboard
- Mpox Provider Alert
- Honoring Washington's Immunization Champions

Votes and Implications

*Updates on the
September 18 & 19, 2025 ACIP Meeting.*



ACIP Key Votes & Updates

- **MMRV vaccine** (ProQuad, Merck) **not recommended** for children under 4 years.
 - VFC program updated to match this guidance.
- **Hepatitis B testing recommended** for all pregnant women (aligns with the U.S. Preventive Services Task Force [USPSTF]).
- **COVID-19 vaccine:**
 - **Individual-based decision-making** (also known as shared clinical decision-making [SCDM]) **recommended** for everyone 6 months+ after discussion with a healthcare professional.
 - More risk information will be added to VIS and informed consent materials.

Hepatitis B birth dose schedule change tabled – expected to return in a future meeting.

ACIP Vote Implications – MMRV

MMRV Vote - PASSED

- No longer recommended for kids under 4 due to seizure risk.
- Still FDA-approved for ages 12 months–12 years.
- Critics note no new safety data; limits parental choice.

ACIP Vote Implications – Hepatitis B

Hepatitis B Testing Vote - PASSED





- Routine prenatal testing already standard practice.
- Impact unclear — mostly a signal to increase testing.

ACIP Vote Implications – Hepatitis B

Hepatitis B Birth Dose Vote – TABLED

- **No change** for now — vote delayed.
- Committee to revisit later; mixed opinions.
- Safety and timing concerns raised; some support later initiation.

COVID-19 Vaccine Votes: Key Outcomes & Implications

Vote	Key Outcome	What it Means
Vote 1: Informed Consent  PASSED	<ul style="list-style-type: none"> CDC to revise education materials to list at least 6 risks. 	<ul style="list-style-type: none"> Could raise vaccine hesitancy; unusual for ACIP scope.
Vote 2: Prescription Requirement  FAILED	<ul style="list-style-type: none"> Would have required prescription for vaccination. 	<ul style="list-style-type: none"> Defeated due to access concerns; vote was split.
Vote 3: Patient Counseling  PASSED	<ul style="list-style-type: none"> Providers urged to discuss safety with patients prior to vaccine administration. 	<ul style="list-style-type: none"> Reinforces informed consent; no new implementation steps.
Vote 4: Vaccine Recommendation  PASSED	<ul style="list-style-type: none"> Recommended for everyone >6 months with shared decision-making. 	<ul style="list-style-type: none"> Broader than FDA license; ongoing distribution unchanged.



DOH Recommendations

STANDING ORDER & WEST COAST HEALTH ALLIANCE

DOH Recommendation

DOH continues to recommend that everyone 6 months and older, including pregnant people, stay up to date with the current COVID-19 vaccine to help protect against severe illness, hospitalization, and death.

DOH supports evidence-based recommendations from trusted national medical associations including the American Academy of Pediatrics (for those 6 months-18 years), the American College of Obstetrics and Gynecology (for all pregnant individuals), and the American Academy of Family Physicians (for adults 19 years and older).



WASHINGTON STATE COVID-19 VACCINE STANDING ORDER

SUBJECT: COVID-19 Vaccine Standing Order

EFFECTIVE DATE: 9/4/2025

AUTHORITY: This standing order is issued under [RCW 43.70.183](#), which authorizes the Secretary of Health or their designee to issue a prescription or standing order for any biological product, device, or drug for purposes of controlling and preventing the spread of, mitigating, or treating any infectious or noninfectious disease or threat to the public health.

PURPOSE: To reduce morbidity and mortality from COVID-19, this statewide COVID-19 vaccine standing order authorizes qualified health care providers to vaccinate persons aged 6 months and older, including pregnant individuals.

AUTHORIZATION: This standing order authorizes health care providers to administer the most updated versions of the COMIRNATY, MNEXSPIKE, SPIKEVAX, and NUVAXOVID COVID-19 vaccines to all persons aged 6 months and older, including pregnant individuals, consistent with applicable law and the terms and conditions below.

TERMS AND CONDITIONS:

COVID-19 vaccination is authorized under this standing order and recommended for all eligible persons aged 6 months and older. Any available COVID-19 vaccine appropriate by age and health status, as determined by the administering health care provider by exercising reasonable medical judgment and consulting the guidance noted above, that is approved by the United States Food & Drug Administration can be used. The most updated version of the COVID-19 vaccine that is available must be used.

For some individuals, vaccination under this standing order will be “off-label” use of currently licensed COVID-19 vaccines. Health care providers can adhere to guidelines developed by professional associations and use their best medical judgement in vaccinating their patients.

Procedure

Assess the individual for COVID-19 vaccination consistent with reasonable medical judgment and the following guidance that is most suitable for the individual being vaccinated:

- **Pediatrics (ages 6 months–18 years):** American Academy of Pediatrics (AAP) COVID-19 vaccine guidance at www.AAP.org/ImmunizationSchedule
- **Pregnant Individuals (all ages as applicable):** American College of Obstetricians and Gynecologists (ACOG) COVID-19 vaccine guidance at www.acog.org/clinical/clinical-guidance/practice-advisory/articles/covid-19-vaccination-considerations-for-obstetric-gynecologic-care
- **Adults (ages 19 years and older):** American Academy of Family Physicians (AAFP) COVID-19 vaccine guidance at www.aafp.org/family-physician/patient-care/prevention-wellness/immunization-schedules/adult0immunization-schedule

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

Visit the Department of Health’s website to confirm that this standing order is currently in effect and to find relevant resources: doh.wa.gov/public-health-provider-resources/standing-orders

All resources linked in this document can be found on the DOH COVID-19 Vaccine Information webpage.

Screen for Contraindications and Precautions

Screen the individual for the contraindications and precautions for COVID-19 vaccination found in Table 3 in the CDC’s *Interim Clinical Considerations for Use of COVID-19 Vaccines in the United States* (https://www.cdc.gov/covid/media/pdfs/2025/07/iCC_document_7.18.25.pdf) and proceed with vaccination according to the recommended actions in the table and reasonable medical judgment.

Administer the Vaccine

Administer the vaccine according to the package insert and best practices.

Document Vaccination

Document each patient’s vaccine administration information in the patient’s medical record and the Washington State Immunization Information System.


Be Prepared to Manage Medical Emergencies

Be prepared for management of a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications. Maintain and follow policies in accordance with *General Best Practices for Immunization* (<https://www.cdc.gov/vaccines/hcp/imz-best-practices/preventing-managing-adverse-reactions.html>) and see *Considerations for people with a history of allergies or allergic reactions* (https://www.cdc.gov/covid/hcp/vaccine-considerations/contraindications-precautions.html#cdc_vaccine_special_topics_research-considerations-for-people-with-a-history-of-allergies-or-allergic-reactions) for more information.

Report All Adverse Events to VAERS

Report all adverse events following the administration of COVID-19 vaccines to the federal Vaccine Adverse Event Reporting System (VAERS) (<https://vaers.hhs.gov/reportevent.html>).

EXPIRATION, RENEWAL AND REVIEW: This standing order will expire on the date that the physician who signed the order revokes it or ceases to act as the Secretary of Health’s designee, whichever comes sooner. This standing order shall be reviewed annually against current best practices and may be revised or updated if new information about COVID-19 vaccines necessitates it.

	September 4, 2025
Physician Signature	Date
Tao Sheng Kwan-Gett, MD MPH MD00031968	1225130941
Physician Name (Printed)	License Number NPI Number

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email doh.information@doh.wa.gov.

COVID-19 Standing Order

- Read the [standing order and 2 sets of FAQs \(for providers and the public\)](#) on the DOH website.
- The barriers to COVID-19 vaccination are complex and the standing order is just one part of the solution.
- We recognize ongoing challenges with vaccine access and provider liability.
- DOH is actively monitoring these issues and working toward solutions.

For the latest information, please visit the [COVID-19 Vaccine Information For Health Care Providers web page](#).

- **Are pharmacies required to dispense and administer COVID-19 vaccines under the standing order?** Yes, a pharmacy is required to dispense and administer

COVID-19 vaccines pursuant to the terms of any other valid prescription. The standing order and, under WAC 246-945-415(2), pharmacies prescribed drugs unless an exception in WAC Having a collaborative drug therapy agreement vaccines does not relieve a pharmacy of its duty to dispense COVID-19 vaccines under the standing order.

- **What if I get denied even with this standing order?** Please be patient with pharmacies, health care professionals and their staff as they adjust to changing guidelines. You can call ahead or try another pharmacy or medical office. If needed, you can file a complaint. The complaint should include:
 - **Where** the denial took place (the name and physical location of the pharmacy)
 - **When** the denial took place (the approximate date and time)
 - **Why** (if known) the health professional refused to provide the vaccine

<https://doh.wa.gov/public-health-provider-resources/standing-orders#COVID19-vaccine>

- **What national or association recommendations does the COVID-19 Vaccine standing order follow?** This standing order follows guidance from the following organizations:

- [American Academy of Pediatrics \(AAP\) COVID-19 Vaccine Guidance](#) for people ages 6 months to 18 years old
- [American College of Obstetricians and Gynecologists \(ACOG\) COVID-19 Vaccine Guidance](#) for pregnant individuals
- [American Academy of Family Physicians \(AAFP\) COVID-19 Vaccine Guidance](#) for people ages 19 years and older.

Pharmacy Assistants (PAs): [File a Complaint](#)
[with the Washington State Board of](#)

Pharmacy Assurance Commission at
fill out the Health Systems Quality
can also email the Pharmacy Quality
[doh.wa.gov](mailto:pharmacyquality@doh.wa.gov) if you have additional

Pharmacists: Use the [Provider Credential](#)
Application and file a complaint.

Are Pharmacies Required to Provide COVID-19 Vaccines Under the Standing Order?

Yes, pharmacies are required by state law to provide COVID-19 vaccines under the standing order, in the same way they are required to fill any other valid prescription. State law includes some exceptions to a pharmacy's duty to fill a prescription:

- If the pharmacy has been unable to stock the medicine
- Does not have the expertise to administer the medicine
- Does not receive its usual and customary or contracted payment

[Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for Health Care Providers](#)

What is My Liability If I Give This Vaccine “Off-label”?

Providers are covered by the same professional liability and malpractice standards that apply to their other medical decisions. Prescribing off-label is a common practice in health care. Providers prescribe [1 in 5](#) medications off-label.

Health care professionals use clinical judgment to recommend what they believe is best for their patients. Providers may follow evidence-based guidelines from national associations. Examples include guidelines by the American Academy of Pediatrics, the American College of Obstetrics and Gynecology, and the American Academy of Family Physicians.

[Washington State Statewide Standing Order for COVID-19 Vaccine FAQs for Health Care Providers](#)

Is There a Cost for the Vaccine?

While the standing order provides access to the vaccine, patients are responsible for the cost of the vaccine.

- **Private insurance:** To confirm if a vaccine is covered, contact your health plan administrator or the [Office of the Insurance Commissioner](#).
- **Washington Apple Health (Medicaid):** Continues to cover the COVID-19 vaccine for members, including children, adults, and pregnant people.
- **Medicare:** Continues to cover the COVID-19 vaccine for everyone with Medicare, including people 65+ and those who are immunocompromised.
 - The vaccines are covered under Part B as a preventive service, so Medicare pays 100% — whether it's the original vaccine or the updated versions. See [2025-2026 COVID-19 vaccine pricing information](#) and [Medicare billing guidance](#) for more details.

[3481125-COVID19VaccineFAQForPublic.pdf](#)

AHIP Statement on Vaccine Coverage

WASHINGTON – AHIP released the following statement 09/16/2025, regarding vaccine coverage.

“Health plans are committed to maintaining and ensuring affordable access to vaccines. Health plan coverage decisions for immunizations are grounded in each plan’s ongoing, rigorous review of scientific and clinical evidence, and continual evaluation of multiple sources of data.

“Health plans will continue to cover all ACIP-recommended immunizations that were recommended as of September 1, 2025, including updated formulations of the COVID-19 and influenza vaccines, with no cost-sharing for patients through the end of 2026.

“While health plans continue to operate in an environment shaped by federal and state laws, as well as program and customer requirements, the evidence-based approach to coverage of immunizations will remain consistent.”

[AHIP Statement on Vaccine Coverage - AHIP](#)

If You're Denied a Vaccine Under a Standing Order

Be patient: Pharmacies and clinics are still adjusting to new guidelines.

Call ahead: Check availability or try another location.

Still denied? You have the right to file a complaint.

What to include:

- Where it happened (pharmacy/clinic name and location)
- When it happened (approx. date and time)
- Why (if known) the vaccine was refused

Where to file a complaint:

- **Doctors / PAs:** [Washington Medical Commission](#)
- **Nurses:** [Washington State Board of Nursing](#)
- **Pharmacies:** Email hsqacomplaintintake@doh.wa.gov or submit the Health Systems Quality Assurance ([HSQA](#)) [complaint form](#). You can also email the Pharmacy Quality Assurance Commission at wspqac@doh.wa.gov with additional questions.
- **Other providers:** Use the [Provider Credential Search](#) to find the correct board.

[3481125-COVID19VaccineFAQForPublic.pdf](#)

DOH Communications – Share News of the Standing Order!

DOH has two sets of FAQs (available in four languages: English, Russian, Spanish, Vietnamese) posted to the Standing Order webpage: one for the public and one for providers.

How You Can Help

- **Promote DOH resources** by linking directly to the Standing Order and FAQs in your communications.
- **Proactively share updates** through your channels, including provider and patient networks to help reduce confusion about the Standing Order.
- **Leverage partnerships** with professional associations to provide education on the Standing Order.
- **Share feedback with us** on additional tools or support that would help you with outreach and education.

West Coast Health Alliance

Overview: Partnership between Washington, Oregon, California, and Hawaii

States work together to align science-based health policies, share data, and issue joint vaccine recommendations

Read: [Concerns Raised Over Impact of ACIP Recommendations on Vaccine Access, Equity, and Parental Choice | Washington State Department of Health](#)

West Coast Health Alliance

- **Why it matters:** Formed in response to politicization of science and to strengthen public trust
- **Expert-led:** Guided by scientists, clinicians, and public health leaders
- **Aligned guidance:** Unified, evidence-based vaccine recommendations across all four states
- **Shared principles:** Each state adapts to local laws and needs while respecting tribal sovereignty and maintaining state autonomy

WCHA Vaccine Recommendations

WCHA is announcing vaccine recommendations for the 2025-26 respiratory virus season including COVID-19, influenza (flu), and respiratory syncytial virus (RSV) summarized in the following table: [FILE 5257.pdf](#)

Age/Condition	COVID-19	Influenza	RSV
Children	<ul style="list-style-type: none"> • All 6-23 months • All 2-18 years with risk factors or never vaccinated against COVID-19 • All who are in close contact with others with risk factors¹ • All who choose protection¹ 	<ul style="list-style-type: none"> • All 6 months and older 	<ul style="list-style-type: none"> • All younger than 8 months² • All 8-19 months with risk factors
Pregnancy	<ul style="list-style-type: none"> • All who are planning pregnancy, pregnant, postpartum or lactating 	<ul style="list-style-type: none"> • All who are planning pregnancy, pregnant, postpartum or lactating 	<ul style="list-style-type: none"> • 32-36 weeks gestational age²
Adults	<ul style="list-style-type: none"> • All 65 years and older • All younger than 65 years with risk factors • All who are in close contact with others with risk factors • All who choose protection 	<ul style="list-style-type: none"> • All 	<ul style="list-style-type: none"> • All 75 years and older • All 50-74 years with risk factors

1. COVID-19 vaccine is available for persons 6 months and older.
 2. Protect infants with either prenatal RSV vaccine or infant dose of nirsevimab or clesrovimab.

IMM-1481 (9/15/25)

OFFICE OF IMMUNIZATION

Washington State Department of Health

Self-Administered FluMist

Available for Private Purchase

- FDA approved the nasal spray live attenuated influenza vaccine FluMist (LAIV3) for self-administration (for 18 through 49 years) or administration by a caregiver ≥ 18 years (for children and adolescents aged 2 through 17 years)
- Consumers use [FluMist Home program](#) to provide information to determine their eligibility to order the vaccine. For persons who meet eligibility criteria to receive FluMist, vaccine will be shipped under temperature-controlled conditions to the address provided by the person placing the order
- ACIP recommendations, contraindications, and precautions for use of FluMist for self-administration or caregiver administration are the same as those for health care provider administration

[Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2025–26 Influenza Season | MMWR](#)



OFFICE OF IMMUNIZATION

Washington State Department of Health

RSV Vaccine Ordering Open in the IIS

- We are still asking providers to advertise excess doses and for providers in need of product to regularly check the advertisements before placing an order.
- Orders will be processed weekly on Wednesdays
- Orders must be in “Pending State Approval” status in the IIS by close of business Tuesday
- Please allow at least 3 days for accountability checks and order approval.
- **Flexible ordering:** Respiratory product orders can be placed anytime and as often as needed.

See full announcement and additional details here:
[Vaccine Blurbs #261: RSV Vaccine Ordering Open Today](#)

Ordering and Inventory Controls Training:
[PDF](#) | [FAQ](#)
[Zoom Webinar Recording](#)

OFFICE OF IMMUNIZATION

Washington State Department of Health

CDC Opens COVID-19 Vaccine Ordering for the 2025–2026 Season

- DOH has completed pre-ordering with providers, and we are ready to proceed.
- Providers should begin to receive vaccine within a week.
- Supply will be limited early in the season - order reductions may occur.
- Ordering instructions have been sent directly to providers.
- Thank you for your continued partnership in protecting Washington communities.

See full announcement and additional details here:

- [CDC Opens COVID-19 Vaccine Ordering for the 2025–2026 Season](#)
- [CVP Vaccine Blurb Newsletter](#)
- [AVP Newsletter](#)



COVID-19 Vaccines Available for Fall 2025

WA DOH Standing Order Guidance

AUTHORIZATION: This standing order authorizes health care providers to administer the most updated versions of the COMIRNATY, MNEXSPIKE, SPIKEVAX, and NUVAXOVID COVID-19 vaccines to all persons aged 6 months and older, including pregnant individuals, consistent with applicable law and the terms and conditions outlined in the [Standing Order](#).

See [DOH COVID-19 Vaccine Schedule](#)

Tradename	Vaccine Type	Approved for use in individuals who are:
COMIRNATY (Pfizer)	mRNA	<ul style="list-style-type: none"> Minimum age, 5 years
MNEXSPIKE (Moderna) <small>*is approved and available on the private market. It will not be supplied via CVP/AVP</small>	mRNA	<ul style="list-style-type: none"> Minimum age, 12 years
NUVAXOVID (Novavax)	Adjuvanted	<ul style="list-style-type: none"> Minimum age, 12 years
SPIKEVAX (Moderna)	mRNA	<ul style="list-style-type: none"> Minimum age, 6 months

Partnering to Prevent Vaccine Loss: Changes for the 2025/2026 Respiratory Season

- New inventory and ordering controls in place
- COVID-19 and flu vaccine no longer exempt from the [Vaccine Loss Policy](#)
- Additional outreach and training
 - [August 21st CVP Training: Ordering and Inventory Controls](#)
Required for all staff that place CVP vaccine orders
 - WCAAP hosted a training for providers on 9/17
Breathe Easy: Best Practices for Respiratory Vaccine Inventory Management



Respiratory Product Ordering

Product	Ordering Open in IIS	Shipping	Under Allocation	“Pending State Approval” Status	Orders Processed Weekly On
Flu	✓	✓	✓	COB day before order processing	Daily
RSV	▪		✓	Tuesday	Wednesday
COVID-19	✓	▪	✓	Wednesday	Thursday

If there is not enough vaccine in allocation, orders will be reduced based on the [equity framework](#) and allocation percentage received

Shelf Life for 2025-2026 COVID-19 Vaccines



Moderna

- Initially, providers should anticipate dating between 3-6 months. As the season progresses, dating may be shorter.



Pfizer

- Vaccines for person 12y+ will arrive refrigerated with at least 12 weeks of remaining shelf life
- Vaccines for children 5-11y will arrive ultracold with at least 3 months of remaining shelf life when stored at ultracold storage temperatures
- As the season progresses, dating may be shorter

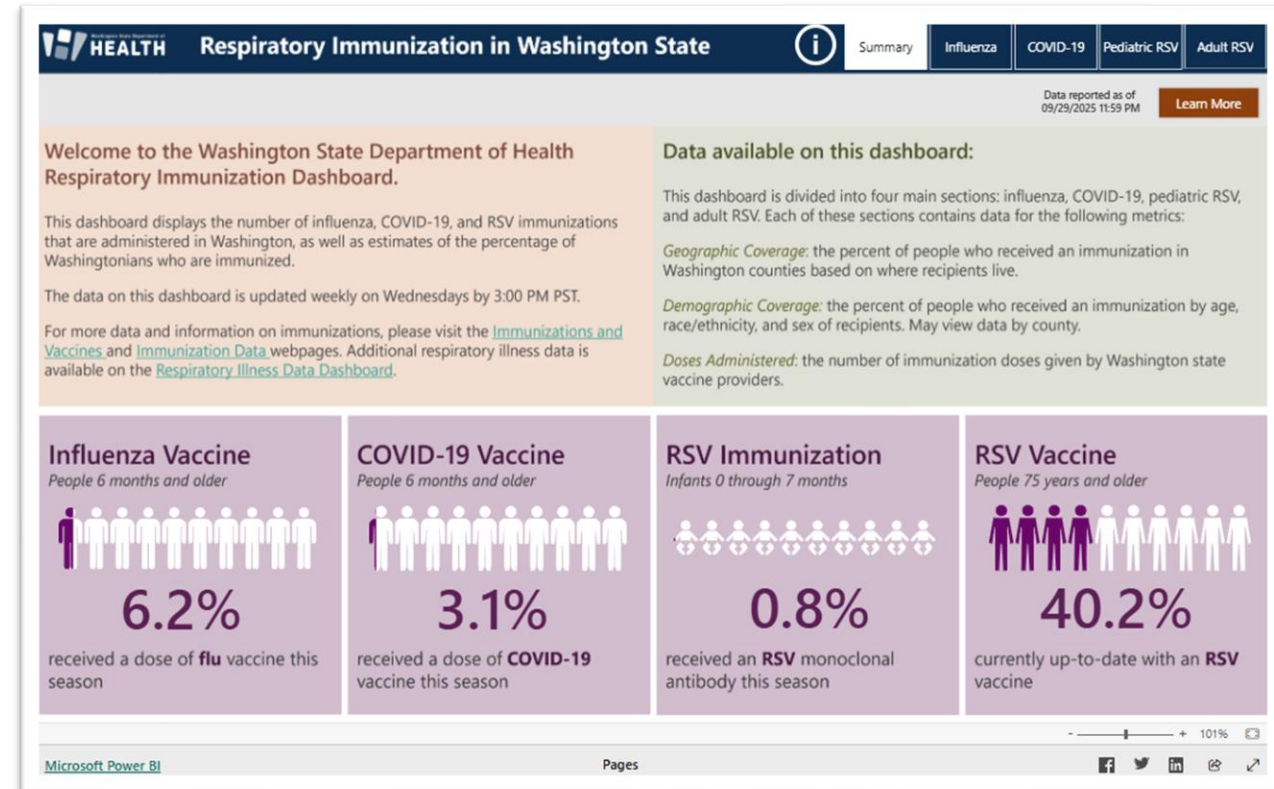


Sanofi/Novavax

- Provider should anticipate product expiry to be 12/31/2025
- Sanofi is working with FDA on shelf-life extension this season

Now Live: WA Respiratory Immunization Dashboard

- Public-facing dashboard brings together vaccination data for influenza (flu), COVID-19, and respiratory syncytial virus (RSV) - both pediatric and adult - into one centralized location for the first time.
- [Respiratory Immunization Data | Washington State Department of Health](#)





WASHINGTON STATE DEPARTMENT OF HEALTH

Provider Alert

Provider Alert: Be Alert for Mpox: Clade I Mpox Virus Detected in Wastewater; Rise in Cases of Clade II Mpox

Date: September 26, 2025 (Links updated 10/1/2025)

This is a Provider Alert from the Washington State Department of Health (WA DOH) Office of Infectious Disease. WA DOH is requesting that providers remain alert for cases of mpox due to:

1. A recent detection of clade I mpox virus in wastewater in Pierce County, and
2. Rising cases of clade II mpox.

Current Situation:

Mpox (formerly "monkeypox"), the infection caused by the mpox virus (MPXV), has been circulating at low levels in Washington State since the 2022 global outbreak of clade II mpox. We have recently seen an **increase in clade II mpox cases in the Puget Sound Area**, associated with sexual and intimate contact among gay, bisexual, and other men who have sex with men, transgender people, and non-binary people.

In addition, WA DOH has been monitoring for **potentially more severe strain of mpox** (clade I) since 2024 due to an ongoing outbreak of clade I mpox in Central and East Africa. To date, we have not identified any cases of clade I mpox in Washington, although other states have identified [travel-related clade I mpox cases](#).

On September 24th, 2025, WA DOH and [Tacoma-Pierce County Health Department \(TPCHD\)](#), in collaboration with the University of Washington, were notified that a wastewater monitoring site in Pierce County detected clade I MPXV. WA DOH has not yet been notified of a case of clade I mpox, and the risk to the community remains low.

Due to the increase in cases of clade II mpox, and the increased likelihood of detecting a case of clade I mpox in Washington after the wastewater detection, WA DOH would like to remind local health jurisdictions and healthcare providers of the following:

1. Be alert for patients with compatible [signs and symptoms of mpox](#).
2. Use travel history to assess the risk of clade I mpox – i.e., patients with recent travel to (or close contact with people who have traveled to) Central or East Africa.
3. Vaccinate at-risk individuals, and vaccinate exposed persons as post-exposure prophylaxis (PEP).
4. Be aware that mpox continues to primarily, but not exclusively, affect gay, bisexual, or other

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Mpox Provider Alert

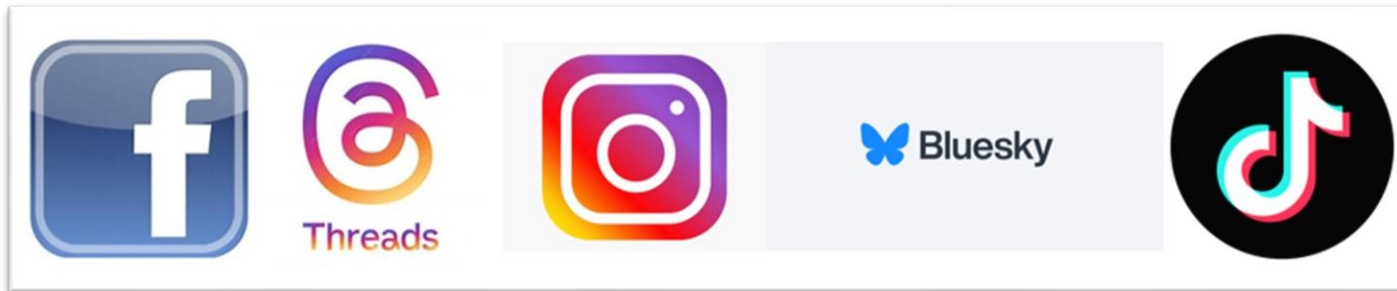
- Detection of clade I mpox virus in wastewater in Pierce County
- Rising cases of clade II mpox in WA
- Providers
 - Be alert for patients with signs/symptoms
 - Test for mpox
 - Offer mpox vaccination to eligible patients
 - JYNNEOS vaccine is effective against clade I and clade II mpox
 - Vaccine can be used as post-exposure prophylaxis (PEP) - 4 days from 1st exposure to prevent disease, 5-14 days after to prevent severe disease

Link: [Provider Alert: Clade I Mpox Virus Detected in Wastewater; Rise in Cases of Clade II Mpox](#)

Stay Informed - Follow DOH Online

Get the latest health news, guidance, and tips right in your feed.

Follow us on: **Facebook**, **Threads**, **Instagram**, **Bluesky**, and **TikTok**.



We share breaking updates and easy, digestible info you can read while scrolling.

CELEBRATIONS!

Honoring Washington's Immunization Champions



The Health Plan Partnership is excited to announce this year's [Immunize WA](#) award winners!

Congratulations to all the clinics recognized for their outstanding work protecting Washington communities.

See the [full list of the 2025 recipients](#) here.

Washington's 2025 Immunization Champion Award Winner – Wil Edwards!



Wil Edwards, PharmD
Head Pharmacist / Owner
Sid's Pharmacy – Pullman, WA

For over a decade, Wil has brought mobile clinics to schools, long-term care facilities, and local businesses; building trust and improving vaccination rates across Whitman County.

Congratulations, Wil!

Read Wil's profile and learn more about AIM's Immunization Champion Award program at: [Immunization Champion Awards - Association of Immunization Managers](#)





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RSV IMMUNIZATION IMPACT IN WASHINGTON INFANTS

Julia C. Bennett, PhD

CDC Epidemic Intelligence Service (EIS) Officer, assigned to WA DOH

Disclaimer

This analysis used unpublished state data and results are considered preliminary.

2023: a pivotal year for RSV prevention

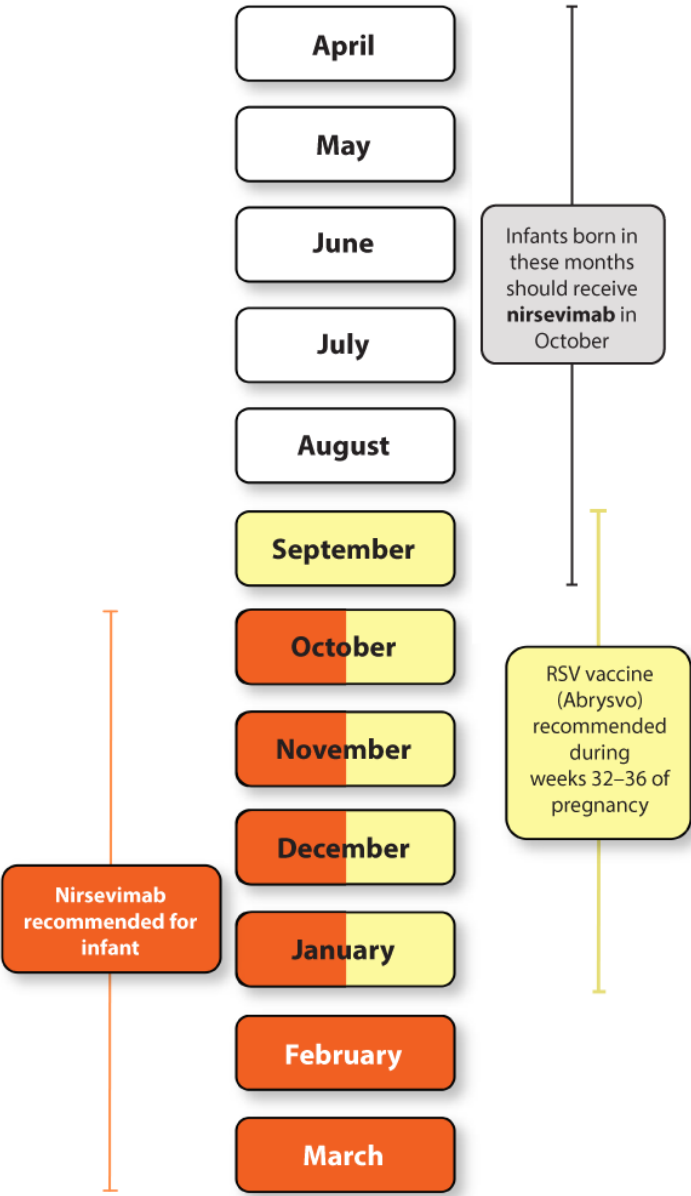
August 3, 2023:



September 22, 2023:

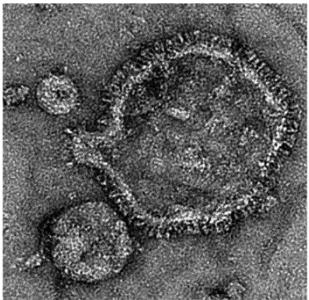


Timing of RSV Immunizations for Infants and Pregnant Women



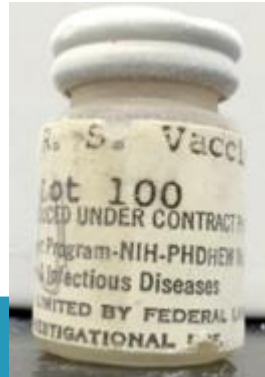
The long journey to protecting infants from RSV

**RSV
discovered**



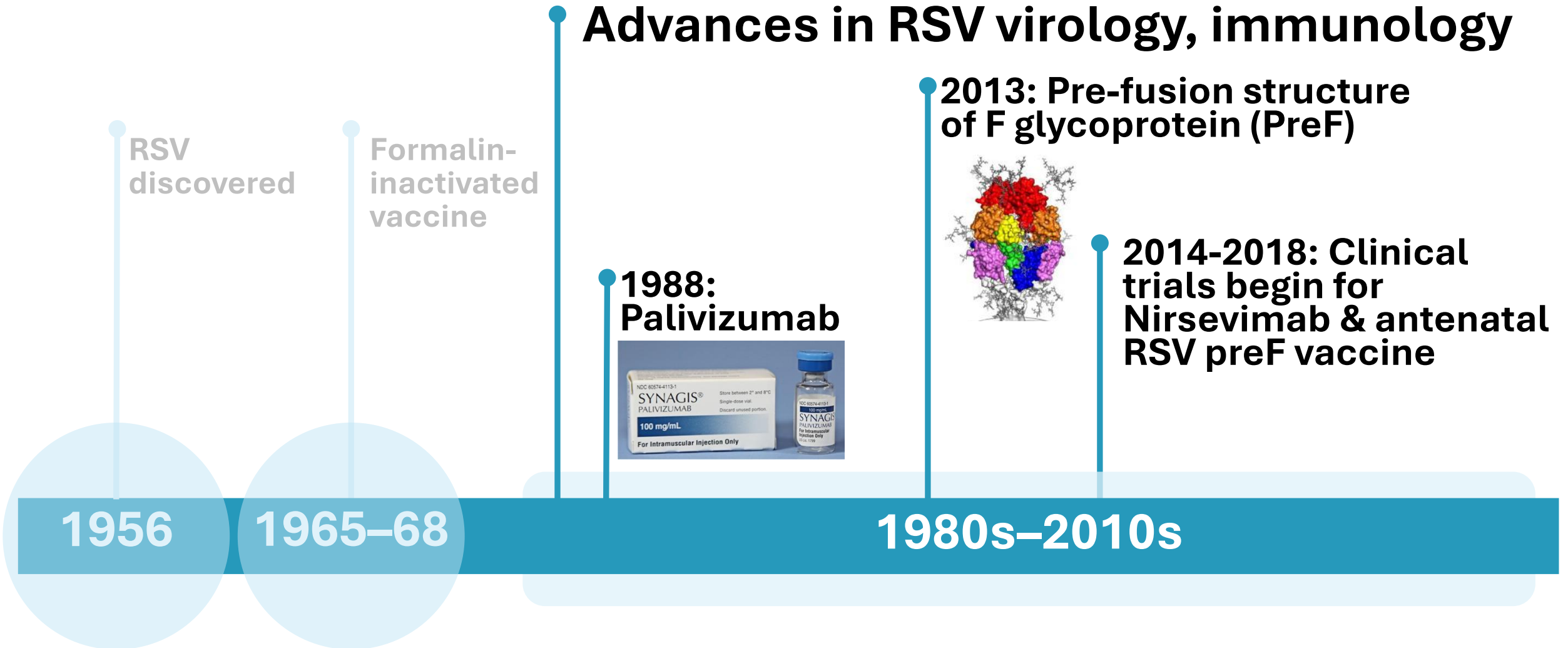
1956

**Formalin-inactivated
vaccine trials begin & are
halted due to enhanced RSV
disease, 2 deaths**



1965-68

The long journey to protecting infants from RSV





Post-licensure effectiveness



Nirsevimab was 90% effective at protecting infants from RSV-associated hospitalization*

Clinicians, talk to parents about nirsevimab, a preventive antibody

* Early estimates from the New Vaccine Surveillance Network, October 2023-February 2024.

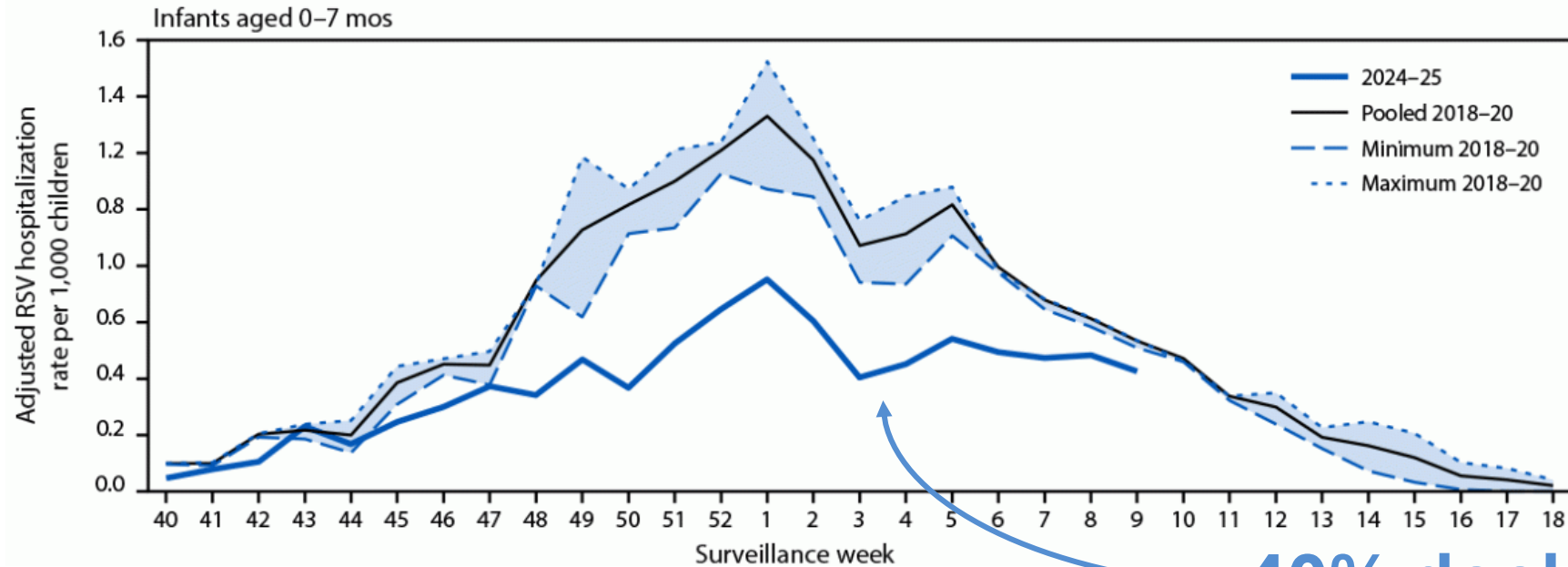
bit.ly/mm7309a4
MARCH 7, 2024

Antenatal RSVPreF vaccine against RSV-associated hospitalization in infants

1. 77% (Argentina)
2. 72% (UK)

Post-licensure impact



~40% decline in RSV-associated hospitalization rate in 2024-25

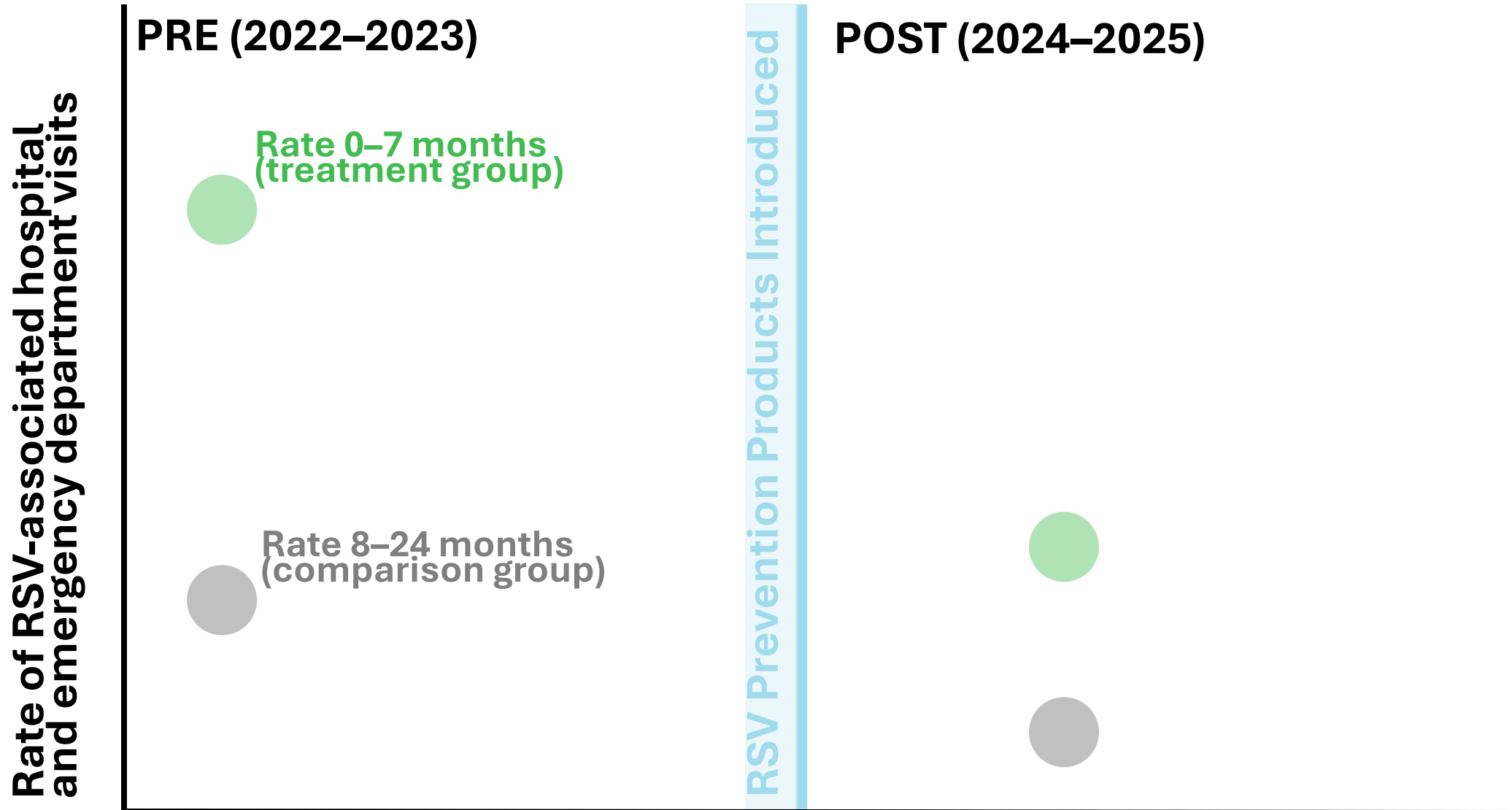
Syndromic surveillance data used to estimate impact across the state



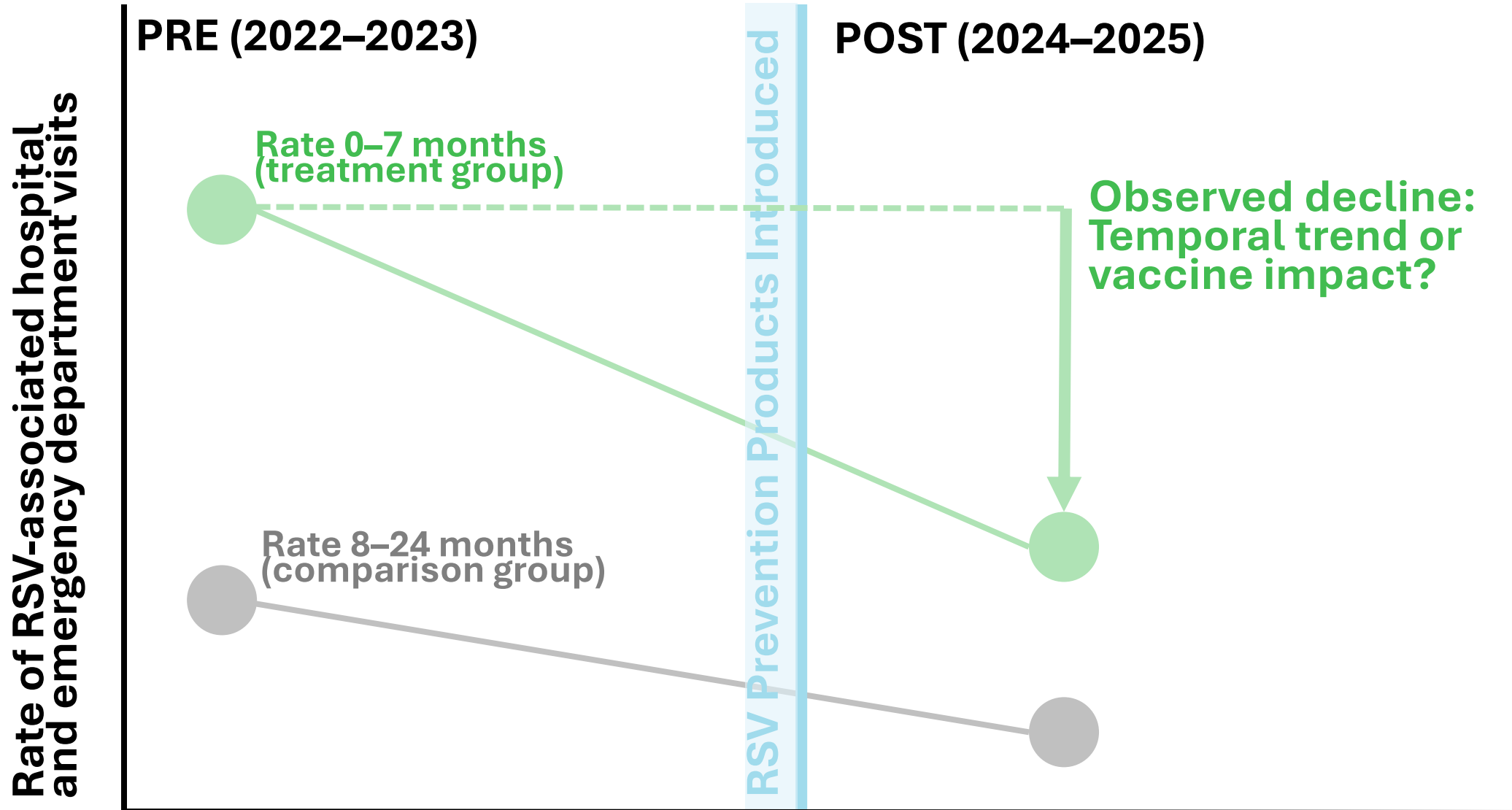
Data inclusion criteria:

- hospitalizations or ED visits among child ≤ 24 months old
- from July 2022 to June 2025
- with RSV diagnosis code
 1. Acute bronchiolitis due to RSV (J21.0)
 2. RSV as the cause of diseases classified elsewhere (B97.4)
 3. RSV pneumonia (J12.1)
 4. Acute bronchitis due to RSV (J20.5)

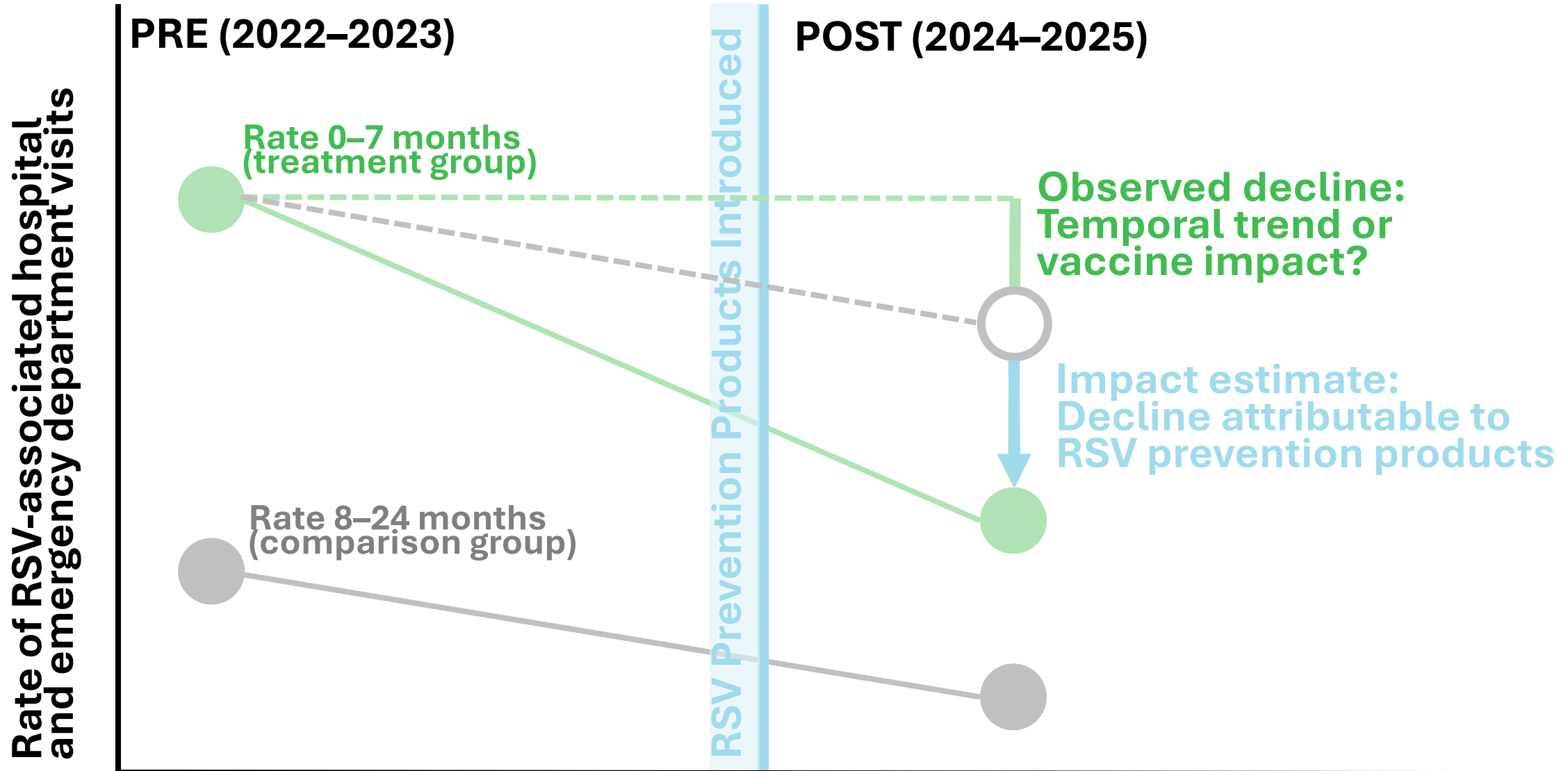
Difference-in-differences study design



Difference-in-differences study design

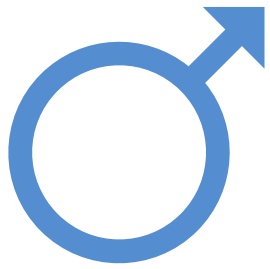


Difference-in-differences study design

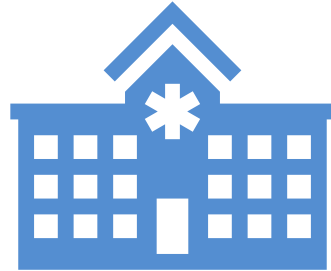


July 2022 to June 2025:

**16,775 RSV-associated hospitalizations & ED visits
among children aged ≤ 24 months**



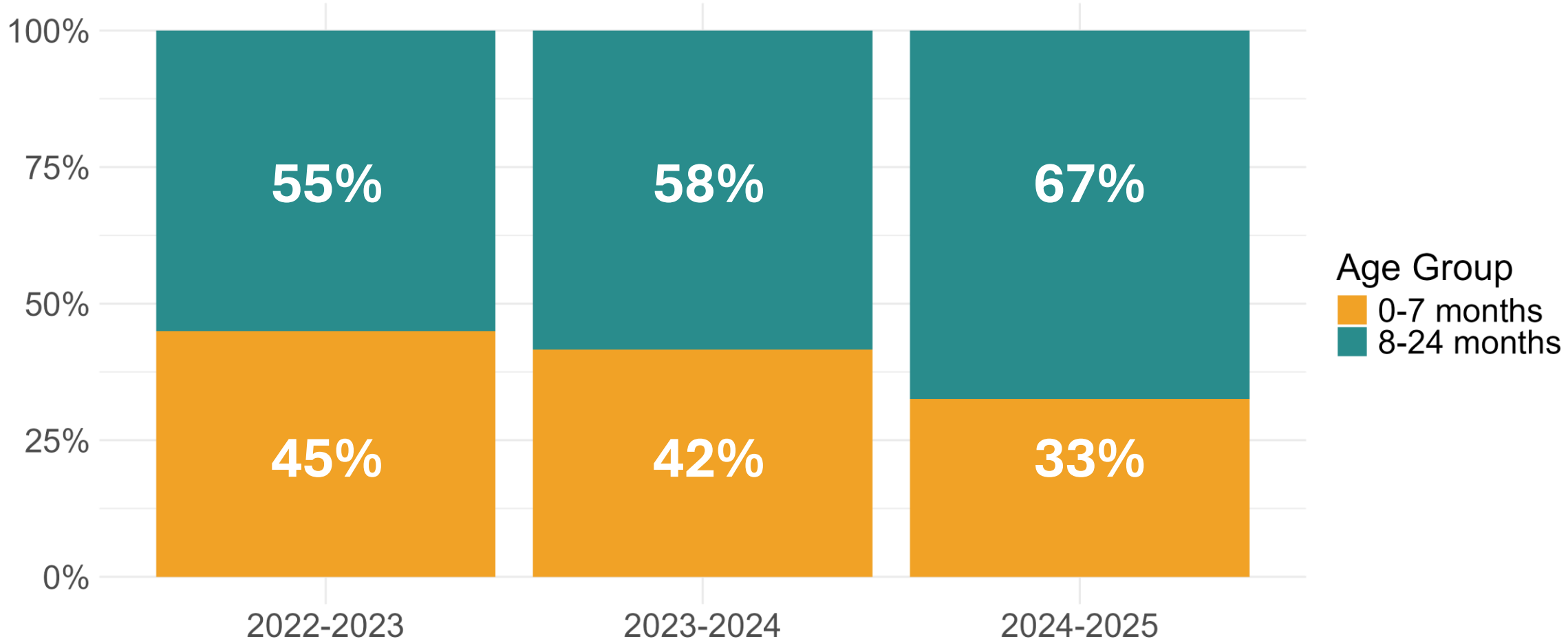
55% male sex



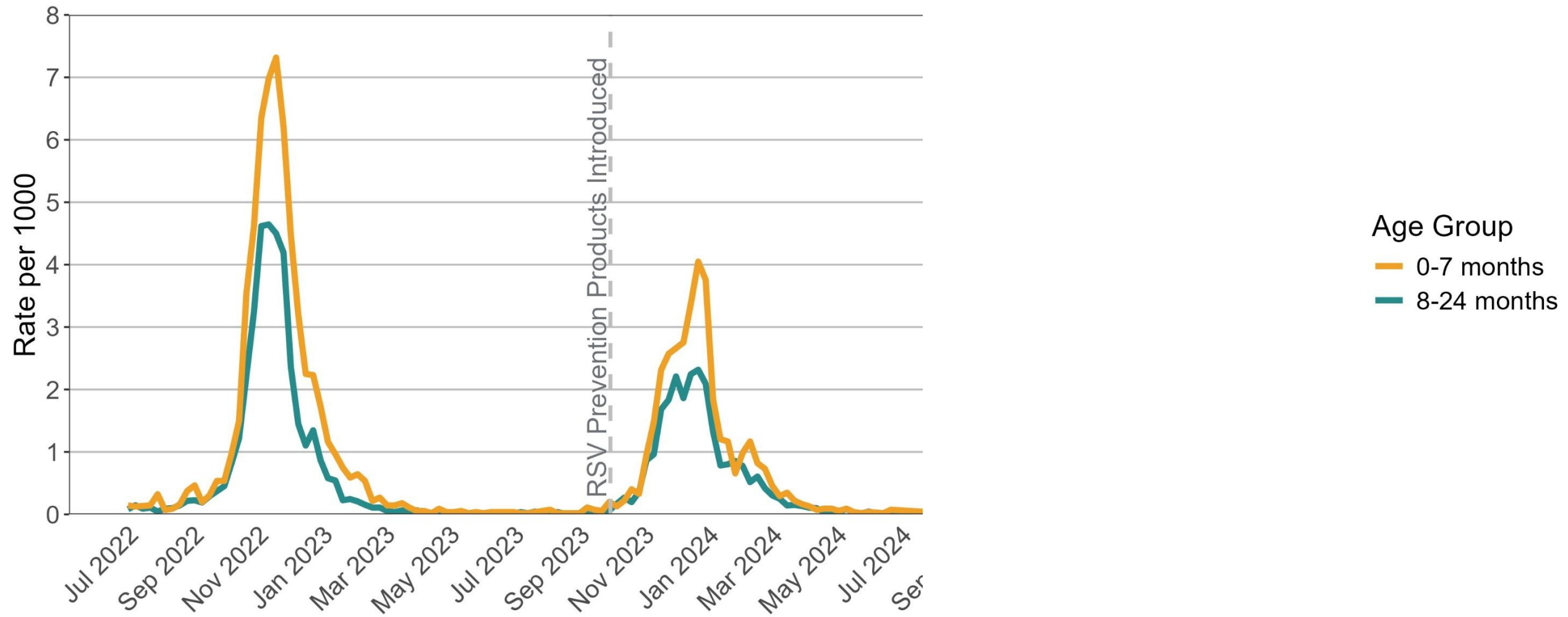
**81% ED only
15% admitted from ED
4% directly admitted**

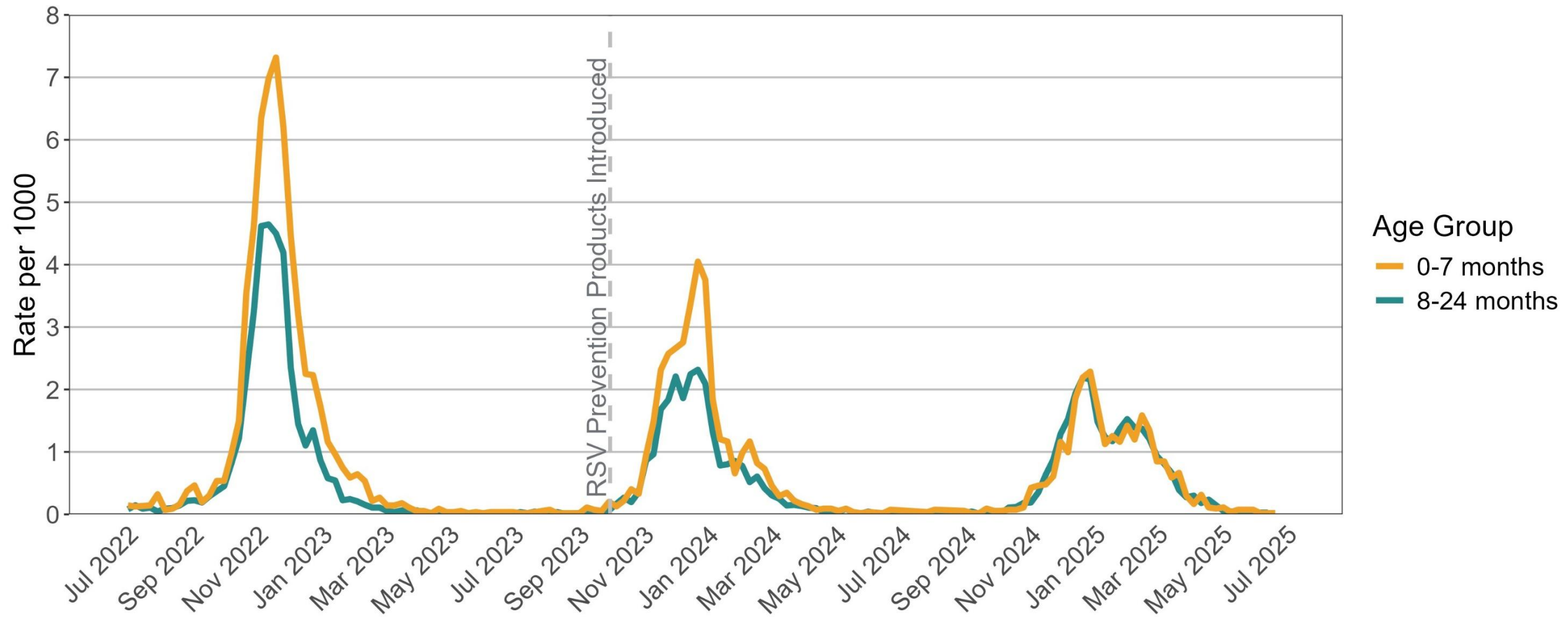
Median age increased with immunization

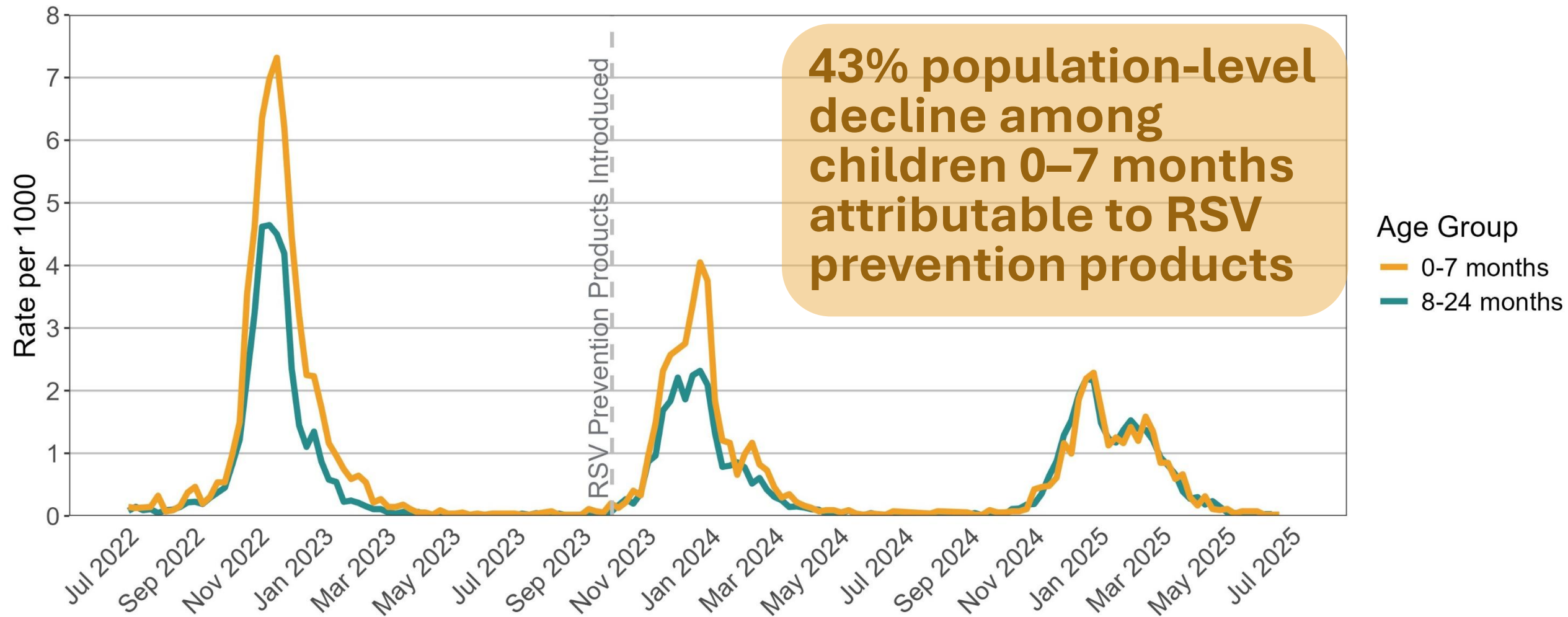
Median age: 9 months 10 months 12 months



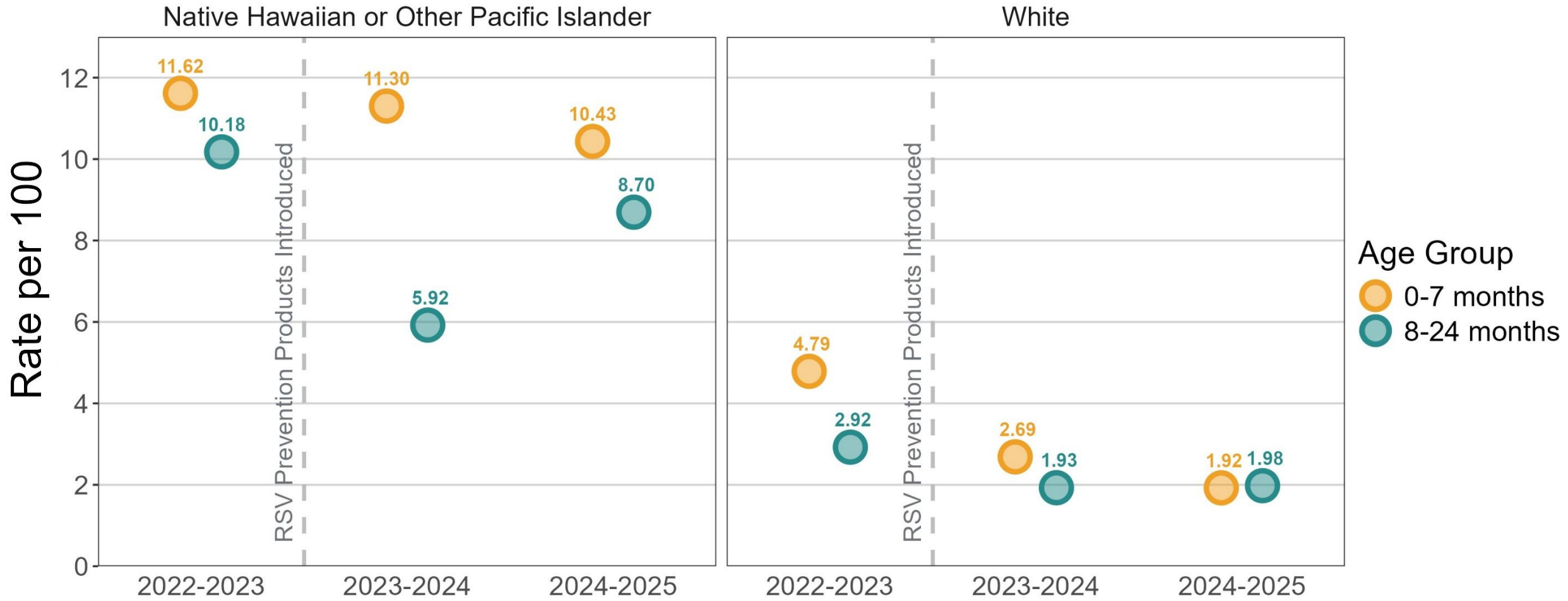


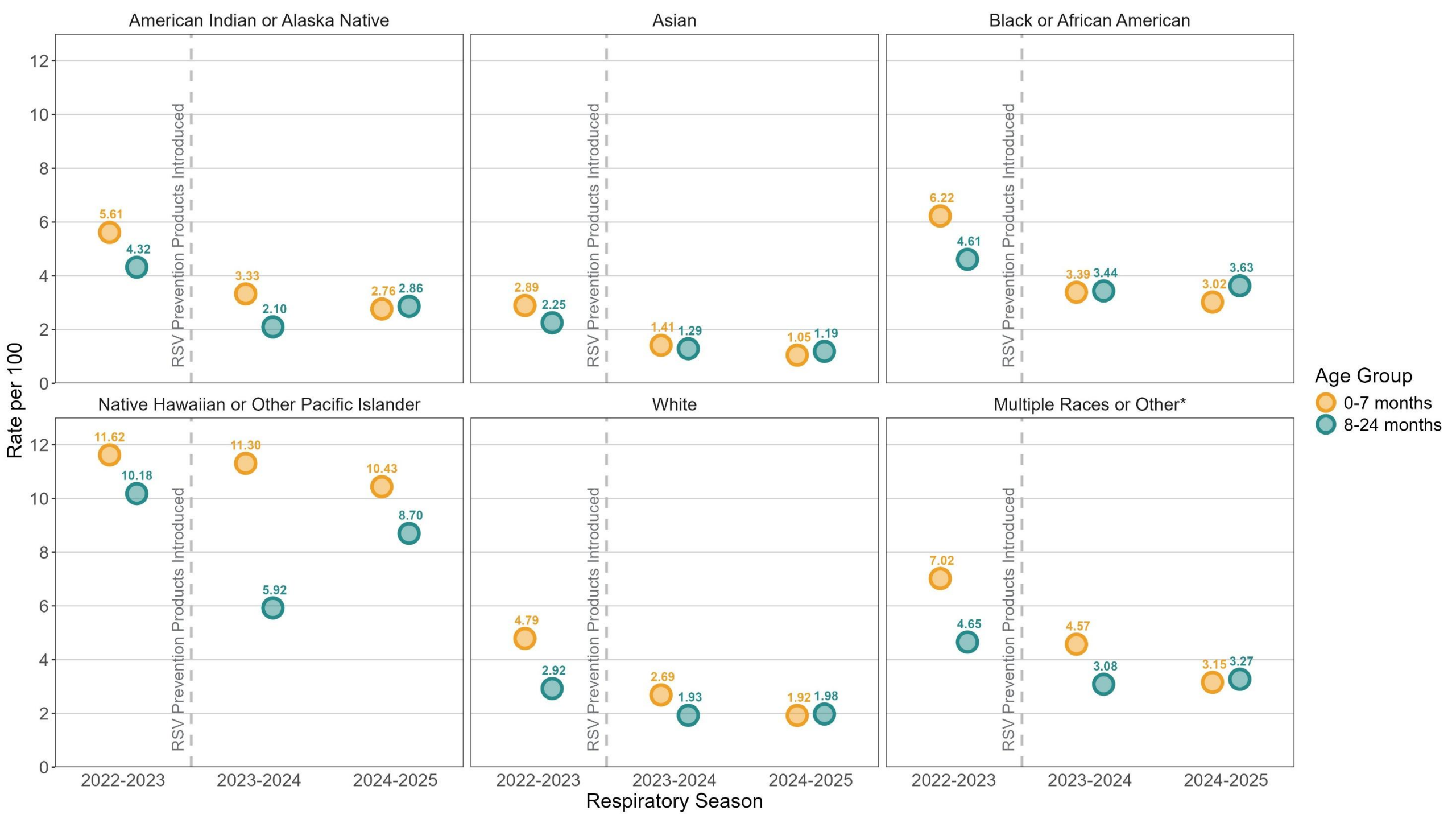






NHPI children have a persistently high burden of disease in the first & second years of life





Infant nirsevimab & antenatal RSVpreF vaccine associated with reduced burden of severe RSV disease in Washington infants

Did you know?

RSV is the #1 reason why babies are admitted to the hospital in their first year.



ACKNOWLEDGMENTS

Washington Department of Health

Elyse Bevers
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Anna Blackstone



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Time	Agenda Item	Facilitator
11:50 – 12:00	BREAK	Adriann Jones
12:00 - 12:10	DOH's Vaccine Guidance Discussion: MMRV & COVID-19	Tao Sheng Kwan-Gett
12:10 - 12:55	VAC Member Report Out and Discussion	VAC Members
12:55 – 1:00	Adjourn	Tao Sheng Kwan-Gett

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Should DOH's COVID-19 vaccine guidance be revised to align fully with AAP recommendations for kids?

- DOH: Everyone 6 months and older needs one updated COVID-19 vaccine dose to be up to date
- AAP: Routine vaccination- Everyone age 6–23 months. Special situation- Children 2-18 years of age whose parent or guardian desires protection from COVID-19 for their child should be offered a single dose
- Please share feedback on COVID-19 vaccine guidance or standing order

How should DOH approach the differing AAP and ACIP recommendations for MMRV for children 12 months through 3 years?

- AAP: either MMR or MMRV
- ACIP: MMRV not recommended



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