

# UNBRANDED MATERIALS GUIDE

This marketing guide features all disease state resources available for you to use to help reach your immunization campaign goals.

A variety of assets is available, including educational and marketing materials for both HCPs and patients. The goal is to raise awareness of **flu**, COVID-19, shingles, whooping cough, RSV, meningitis, and other preventable diseases, highlighting the importance of vaccination.

Please reach out to your representative or the VaxServe marketing team for more information at [VaxServeMarketing@VaxServe.com](mailto:VaxServeMarketing@VaxServe.com).

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# FLU

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## PATIENT FACING MATERIALS

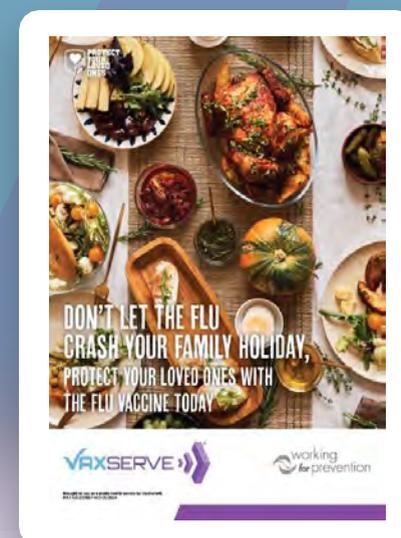
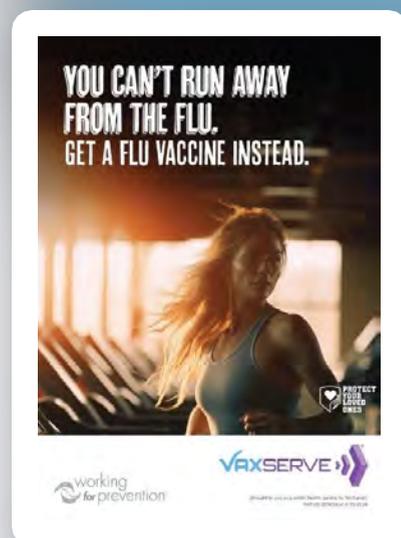
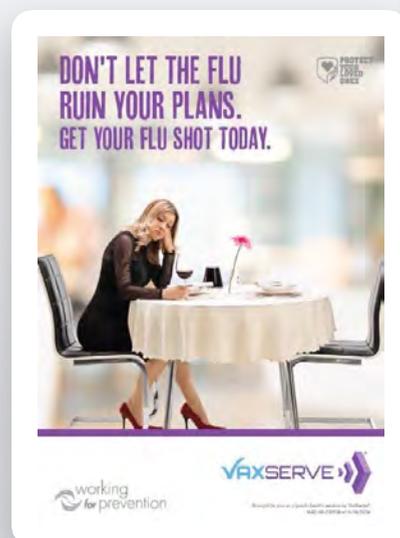
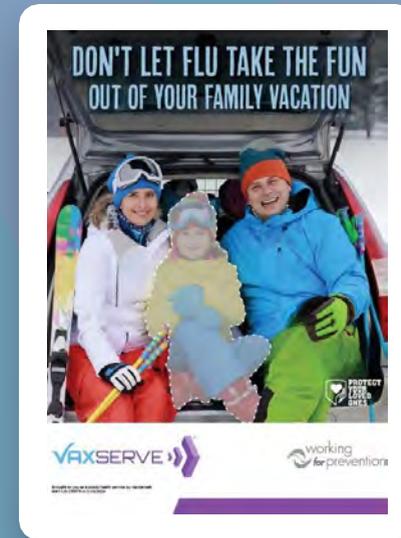
### Flu: Working for Prevention Flashcards

Target Audience: Parents or guardians of children, elderly individuals, families planning vacations, individuals with **specific** outing plans who are eligible for the **flu** vaccine.

Objective: These **flashcards** raise awareness about **influenza** by providing key information on symptoms, risks, and the importance of timely vaccination.

Click on the image to download the asset.

## Front Cover Options



## Back Side of Flashcard

**Millions of people get the flu every year<sup>1</sup>**  
The CDC recommends eligible patients 6 months and older should get a flu vaccine every year. An infected person can easily spread the flu by droplets made when they cough, sneeze, or talk. Less likely, a person can also contract the flu by touching a contaminated surface and then touching their mouth, nose, or eyes.

**Vaccination is the key to flu prevention**

Flu vaccination has been shown to reduce flu-related illnesses and the risk of serious flu complications.<sup>1</sup>

**Help slow the spread of the flu**

- Stay away from people who are sick
- Cover your mouth when coughing or sneezing
- Wash your hands frequently

**Did you know?**

Not everyone with the flu will have a fever!

**If you have the flu, you may feel some or all of these symptoms:<sup>1</sup>**

- Fever or Feeling Feverish/Chills
- Sore Throat
- Muscle or Body Aches

**You may be spreading the flu even before you know you have it!<sup>1</sup>**

- Symptoms typically begin about two days after a person is infected. It is possible to spread the flu virus before showing symptoms.
- People are most contagious in the first 3-4 days after illness begins.
- Young children and those with weakened immunity may be contagious longer.

**You may be at higher risk if you are:**

- An adult 65 years or older
- A person with certain chronic conditions, like asthma, diabetes, or heart disease.
- A child under 5 years old<sup>1</sup>

**Ask your Health Care Professionals about FLU Vaccination today!**

<sup>1</sup> Centers for Disease Control and Prevention. Accessed November 10, 2023. <https://www.cdc.gov/flu>

# FLU

01



## PATIENT FACING MATERIALS

### Flu Myth-Busters Flashcard

Target Audience: People who might be considering a **flu** vaccine but would like to learn more.

Objective: Use this **flashcard** to help educate patients on common misconceptions about **flu** and **flu** vaccines.

Click on the image to download the asset.

**DO YOU KNOW THESE FACTS ABOUT THE FLU?**

- THE FLU CAN CAUSE REAL HARM — EVEN TO YOU.**  
In a 10-year study, 1,227 adults 40 years of age and older had ~10x increased risk of first heart attack and 752 adults 40 years of age and older had a ~8x increased risk of first stroke, within one week of getting the flu.
- THE FLU CAN HURT EVEN HEALTHY PEOPLE.**  
Influenza can lead to serious complications, including hospitalization, for otherwise healthy individuals. In addition, otherwise healthy people who come down with the flu can then spread it to more vulnerable individuals, such as children, the elderly, and those with a chronic illness. But another way to think about it is that vaccination is part of a healthy lifestyle. If you live healthy, eat healthy, and exercise regularly, for example, influenza vaccination can also help you stave off flu and its complications.
- THE FLU SPREADS, EVEN WHEN PEOPLE ARE WEARING MASKS.**  
Wearing a mask and physical distancing can help protect you and others from respiratory diseases, including the flu. However, one of the best ways to reduce your risk of flu illness and potentially serious complications from it is to get vaccinated with a flu shot.
- THE FLU VACCINE CANNOT GIVE YOU THE FLU.**  
Flu vaccines do not cause the flu. The symptoms you may feel after a shot are not the flu. They are part of the normal process of your body's immune system developing an immune response to the vaccine to help protect you from the flu. As this process can take up to 2 weeks, people may come down with the flu shortly after receiving a vaccine unrelated to the vaccine itself.
- FLU VACCINES ARE ONE OF THE BEST WAYS TO PROTECT AGAINST THE FLU.**  
Flu vaccines are proven to help provide protection against the flu and reduce severity of illness in people who get vaccinated but still get sick. Flu vaccination also may help reduce the risk of flu-related hospitalizations and potentially serious flu complications in people with certain chronic health conditions, such as heart disease, lung disease, and diabetes.
- A FLU VACCINE IS RECOMMENDED EVERY YEAR.**  
The flu vaccine you received for last year's flu may not offer protection from this year's flu. One reason is because influenza is constantly changing, and the flu vaccines are updated each year to help protect against the specific viruses circulating that season. Even if you received a flu vaccine last year, you could benefit from a flu vaccine this year.
- COVID-19 VACCINES WILL NOT PROTECT YOU AGAINST THE FLU.**  
A flu vaccine can help protect against the flu. Both flu and COVID-19 vaccines are important and recommended for appropriate patients. While CDC guidelines allow you to receive both vaccines at the same time during the same visit, you should still follow the recommended vaccination schedules for each.

**ASK YOUR HEALTHCARE PROVIDER ABOUT GETTING A FLU VACCINE TODAY**

**FACTS ABOUT THE FLU AND CHILDREN**

- CHILDREN CANNOT GET THE FLU FROM THE FLU VACCINE.**  
Just like the vaccine for adults, flu vaccines do not cause the flu. However, flu vaccines can cause side effects that are generally mild (per source) that may be mistaken for flu and may go away on their own within a few days.
- YOUR CHILD SHOULD RECEIVE A FLU VACCINATION THIS YEAR.**  
Flu can pose a serious risk to children. During the 2022-2023 flu season there were almost 50,000 hospitalizations and 476 deaths related to flu in children under the age of 18. This risk can be reduced with flu vaccination for children 6 months and older.
- ALL CHILDREN AGED 6 MONTHS AND ABOVE ARE RECOMMENDED TO RECEIVE AN INFLUENZA VACCINE IN THE US PER ACIP RECOMMENDATIONS.**  
Serious complications from flu can occur even if your child is healthy. Also, getting a flu vaccine can help protect not just your child, but others around them.

**ASK YOUR HEALTHCARE PROVIDER ABOUT GETTING YOUR CHILD A FLU VACCINE TODAY**

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# FLU

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PATIENT FACING MATERIALS

## Retail Flu Shot Importance Flashcard

Target Audience: Eligible patients who may not think they need a **flu** shot every year.

Objective: This **flashcard** helps educate patients on the importance of annual **flu** vaccination and highlights the option of co-administration of vaccines.

Click on the image to download the asset.

# YOUR ANNUAL FLU SHOT IS MORE IMPORTANT THAN EVER

**HERE'S WHY:** Last flu season, **~53%** of Americans were **UNVACCINATED** against the flu, which could lead to flu or flu-related complications.\*



\*CDC estimates for the 2024-2025 flu season were recorded as of May 7, 2025. CDC-Centers for Disease Control and Prevention.

The flu can have serious consequences, even in healthy individuals:

The flu can increase the risk of first stroke by **~8x**  
1-3 days after influenza infection in adults 40+  
UP TO **27,000 - 130,000** **FLU DEATHS<sup>b</sup>**

The flu can increase the risk of a first heart attack by **~10x**  
1-3 days after influenza infection in adults 40+  
UP TO **610,000 - 1.3 MILLION** **FLU HOSPITALIZATIONS<sup>b</sup>**



<sup>a</sup>These are CDC preliminary estimates from October 1, 2024, through May 17, 2025 and are subject to change.

### You can help protect yourself for the upcoming flu season.

A flu shot can help prevent you from getting sick with flu and may help reduce the outcomes it can potentially lead to, including:



Flu-related heart complications and pneumonia



More sick days and less productivity



Making chronic conditions worse



Infecting your family and friends

In 2023-2024, flu vaccines prevented **~9.8 MILLION** INFLUENZA-RELATED ILLNESSES.

**SCHEDULE YOUR FLU SHOT TODAY**

# ARE YOU READY FOR FLU SEASON?



Be prepared with these common FAQs around flu and respiratory vaccinations

### FAQs about the flu:

#### ? Flu Vaccination

##### Can the flu shot give me the flu?

Flu shots do not cause the flu. The symptoms you may feel after a shot are not the flu. They are part of the normal process of your body's immune system developing an immune response to the virus to help protect you from the flu.

##### Why should I get a flu shot every year?

The flu vaccine you received for last year's flu may not offer protection from this year's flu. Influenza is constantly changing, and the flu vaccines are updated each year to help protect against the specific viruses circulating that season. Even if you received a flu vaccine last year, you could benefit from a flu vaccine this year.

##### Are flu vaccines safe?

Yes. Flu vaccines have been safely given to millions of people for over 50 years. They are carefully tested and monitored. Getting a flu shot every year is the best way to protect yourself and others from the flu.

#### ? Co-administration

##### What is co-administration?

Co-administration of vaccines means getting more than one vaccine during a single visit.

##### Can I get COVID-19, flu, and RSV vaccines at the same time?

Yes. Per the CDC, Flu, COVID-19, and RSV vaccines may be given at the same visit. Talk with your health care provider about this option. If you prefer to receive each vaccine at a separate visit, there is no minimum waiting period between these vaccines.

##### Why get multiple vaccines at the same time?

It's convenient to get up to date on all vaccines in one visit, instead of returning for separate visits.



**ASK YOUR PHARMACIST ABOUT GETTING VACCINATED TODAY**

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# COVID

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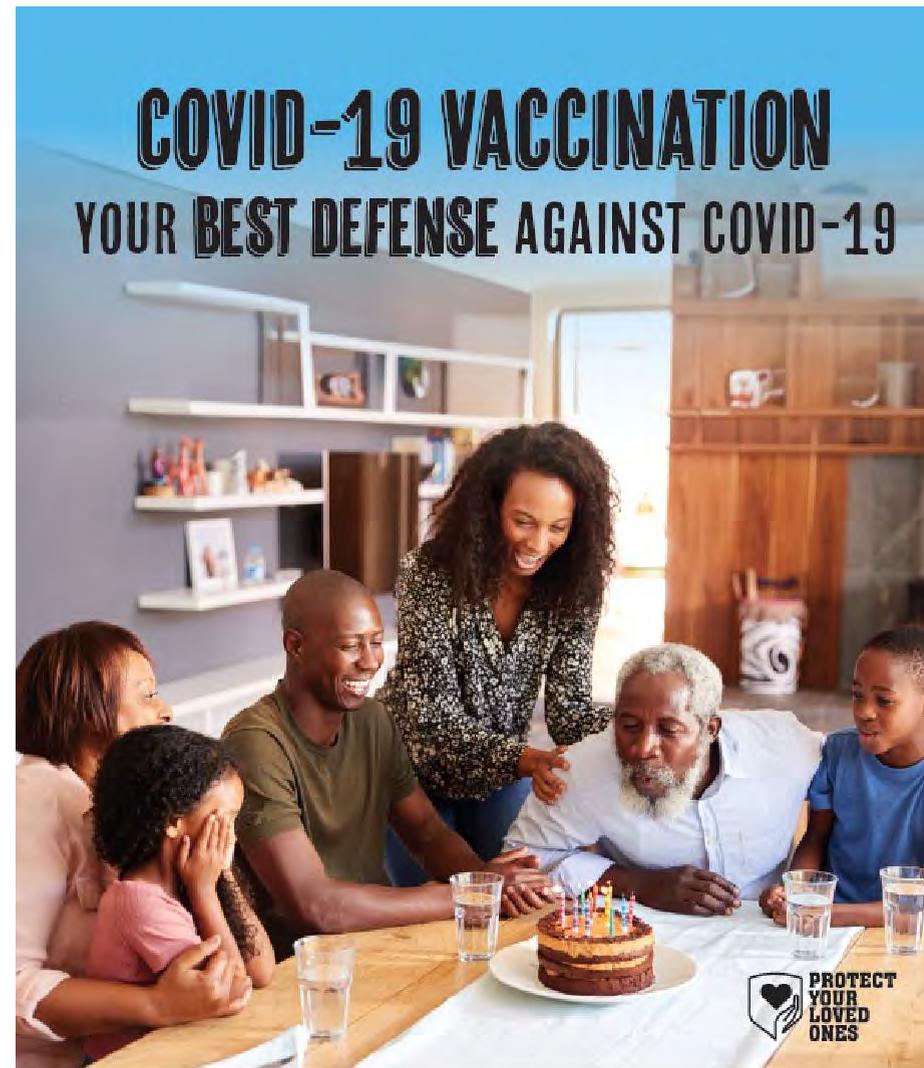
PATIENT FACING MATERIALS

COVID Working for Prevention

Target Audience: Families uncertain about why COVID-19 vaccination is important.

Objective: This material educates families on how COVID-19 spreads and how vaccination can help protect themselves and loved ones.

Click on the image to download the asset.



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**Understanding COVID-19<sup>1</sup>:**  
What you should know

- COVID-19 is a disease caused by the SARS-CoV-2 virus.
- It can be very contagious and can spread quickly.
- As of June 1, 2024, nearly 1.2 million people have died of COVID-19 in the U.S.

**Can you get reinfected?<sup>2</sup>**  
**Yes, reinfection is possible.**  
You can get COVID-19 more than once. Staying updated with COVID-19 vaccines reduces your risk of severe illness.

**Symptoms to Watch For**

<b>Fever or Feeling Feverish/Chills</b>	<b>Sore Throat</b>	<b>Muscle or Body Aches</b>
<b>Shortness of Breath</b>	<b>Cough</b>	<b>Runny or Stuffy Nose</b>
<b>Headaches</b>	<b>Fatigue (Tiredness)</b>	<b>Vomiting and Diarrhea</b>

• Symptoms may appear 2-14 days after exposure to the virus.<sup>3</sup>  
• Symptoms may start as mild, and some will become more severe.<sup>3</sup>

**Who's Most at Risk?<sup>4</sup>**

- People of all ages, including children and teens, can get very sick from COVID-19, especially those with underlying medical conditions.
- Older adults are at the highest risk of becoming severely ill from COVID-19, accounting for more than 81% of COVID-19 deaths in the population aged 65 and older. According to provisional death data from CDC, the death rate among adults older than 65 years is 97 times higher than that of individuals aged 18-29.

**Getting a COVID-19 vaccine is a safer and more dependable way to build immunity to COVID-19 than getting sick with COVID-19<sup>5</sup>**

Everyone aged 6 months and older is recommended by ACIP to get the seasonal COVID-19 vaccine. This includes people who have received a COVID-19 vaccine in a previous season and people who have had a prior COVID-19 infection.<sup>6</sup>

**How to protect yourself and your loved ones?<sup>7</sup>**

- Stay Up to Date on COVID-19 Vaccines**  
COVID-19 Vaccination is offers protection against severe illness, hospitalization, and death from COVID-19.
- Practice Good Hygiene**  
Wash your hands often and maintain cleanliness to reduce the spread.
- Take Action if You're Sick**  
Stay home if you have symptoms and consult a health care provider for testing and treatment, if you're at risk of severe illness.

**Ask your Health Care Professional about COVID Vaccination today!**

**Vaccination Options<sup>8</sup>**

There are two types of COVID-19 vaccines available: **mRNA and Recombinant Protein Vaccines.**

- These vaccines can help your body recognize and protect against the virus that causes COVID-19.
- They do not contain live virus and cannot give you COVID-19.
- The vaccines do not interact with your DNA or change your genes in any way.

mRNA, messenger ribonucleic acid; SARS-CoV-2, Severe acute respiratory syndrome coronavirus 2.

References:  
 1. Centers for Disease Control and Prevention. About COVID-19. Available at: <https://www.cdc.gov/covid/about/>. Accessed August 7, 2024.  
 2. Centers for Disease Control and Prevention. About Reinfection. Available at: <https://www.cdc.gov/covid/about/reinfection.html>. Accessed August 7, 2024.  
 3. Centers for Disease Control and Prevention. Symptoms of COVID-19. Available at: <https://www.cdc.gov/covid/symptoms/index.html>. Accessed November 8, 2024.  
 4. Centers for Disease Control and Prevention. People with Certain Medical Conditions and COVID-19 Risk Factors. Available at: <https://www.cdc.gov/covid/risk-factors/index.html>. Accessed November 8, 2024.  
 5. Centers for Disease Control and Prevention. Myths & Facts About COVID-19 Vaccines. Available at: <https://www.cdc.gov/covid/vaccines/myths-facts.html>. Accessed October 3, 2024.  
 6. Centers for Disease Control and Prevention. Staying Up to Date with COVID-19 Vaccines. Available at: <https://www.cdc.gov/covid/vaccines/stay-up-to-date.html>. Accessed October 3, 2024.  
 7. Centers for Disease Control and Prevention. How to Protect Yourself and Others. Available at: <https://www.cdc.gov/covid/prevention/index.html>. Accessed August 7, 2024.  
 8. Centers for Disease Control and Prevention. COVID-19 Vaccine Basics. Available at: <https://www.cdc.gov/covid/vaccines/how-they-work.html>. Accessed October 15, 2024.

# COVID

01



## PATIENT FACING MATERIALS

### Unbranded COVID & Flu Handout for Healthcare Employees

Target Audience: Healthcare workers, especially those in direct patient care, who face a higher risk of exposure to **flu** and COVID-19.

Objective: This material encourages healthcare workers to get both **flu** and COVID-19 vaccines to help protect themselves, their patients, and families, highlighting the possibility of co-administration.

Click on the image to download the asset.

**HOW ARE YOU PROTECTING YOURSELF FROM RESPIRATORY VIRUSES?**

**~4 in 10** healthcare workers reported **working while experiencing flu symptoms.**<sup>1\*</sup>

**~1 in 2** healthcare workers reported **working while experiencing COVID-19 symptoms.**<sup>2†</sup>

**In a study of healthcare workers who reported working with flu-like illness, less than half were vaccinated.**<sup>3‡</sup>

**In a study of healthcare workers who tested positive for COVID-19, only 15% were vaccinated.**<sup>2</sup>

**SEE HOW YOU CAN HELP PROTECT YOURSELF TODAY →**

\*Using a national nonprobability internet panel survey of 1914 HCPs during the 2014-2015 flu season where 183 (41.4%) reported working with flu-like illness.  
†In an observational cohort study including all healthcare workers at the Veterans Affairs Boston Healthcare System who tested positive for lab-confirmed SARS-CoV-2 infection. Among those symptomatic with COVID-19, 127 of the 255 symptomatic HCWs (49.8%) reported presenteeism at the time of diagnosis. Sickness presenteeism is defined as working while sick.  
‡Data on timing of vaccination were not available. Therefore, it was not possible to determine the proportion of HCPs who had received flu vaccination by the time of their flu-like illness.

**References:** 1. Chiu S, Black CL, Yue X, et al. Working with influenza-like illness: presenteeism among US health care personnel during the 2014-2015 influenza season. *Am J Infect Control.* 2017;45(11):1254-1258. doi:10.1016/j.ajic.2017.04.008 2. Linsemeyer K, Mohr D, Gupta K, et al. Sickness presenteeism in healthcare workers during the coronavirus disease 2019 (COVID-19) pandemic: an observational cohort study. *Infect Control Hosp Epidemiol.* 2023;44(10):1693-1696. doi:10.1017/ice.2023.47

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**HELP PROTECT YOURSELF THIS FLU SEASON—GET YOUR FLU AND COVID-19 VACCINES TOGETHER**

TAKE THE TIME TO GET YOUR VACCINES SO YOU CAN KEEP PROTECTING YOUR PATIENTS

During the 2022-2023 flu season, ~360,000 patients were hospitalized with the flu, and in 2023, ~900,000 people were hospitalized with COVID-19.<sup>1,2</sup>

These hospitalizations put extra strain on the healthcare system and on essential workers like you.<sup>2</sup> But you can set an example for your patients and help protect them at the same time by having your annual flu shot and COVID-19 vaccine co-administered.<sup>3-5</sup>

**PROTECT YOURSELF**

Vaccination against flu and COVID-19 have each been associated with decreased risk of illness and hospitalizations.<sup>6,7</sup>

**PROTECT YOUR LOVED ONES**

Flu and COVID-19 vaccines can help reduce the spread of disease. Getting both vaccines is your first step to protecting your family and friends.<sup>8,9</sup>

**PROTECT YOUR PATIENTS**

Patients who are older, are pregnant, or have certain comorbidities are at higher risk of severe illness from flu and COVID-19. Your patients may be extra-vulnerable, but you can help keep them safe.<sup>4,5</sup>

**GETTING YOUR FLU AND COVID-19 VACCINATIONS TOGETHER CAN SAVE MORE THAN JUST TIME**

Co-administration of flu and COVID-19 vaccines is supported by the CDC.<sup>3</sup> With just 1 appointment and 2 shots, you can help protect yourself, your loved ones, and your patients from the consequences of flu and COVID-19.<sup>6-9</sup>

**ACT NOW TO HELP PROTECT YOURSELF AND YOUR PATIENTS. ASK ABOUT YOUR FLU AND COVID-19 VACCINE OPTIONS TODAY.**

CDC=US Centers for Disease Control and Prevention.  
References: 1. CDC. The changing threat of COVID-19. February 23, 2024. Accessed November 11, 2024. <https://www.cdc.gov/ncird/whats-new/changing-threat-covid-19.html> 2. CDC. Preliminary estimated flu disease burden 2022-2023 flu season. November 22, 2023. Accessed November 1, 2024. <https://www.cdc.gov/flu-burden/php/date-vs/2022-2023.html> 3. CDC. Best practices for patient care. October 2, 2024. Accessed November 6, 2024. <https://www.cdc.gov/respiratory-viruses/hcp/clinical-safety/index.html> 4. CDC. People at increased risk for flu complications. September 11, 2024. Accessed October 9, 2024. <https://www.cdc.gov/flu/highrisk/index.htm> 5. CDC. Underlying conditions and the higher risk of severe COVID-19. July 30, 2024. Accessed November 6, 2024. <https://www.cdc.gov/covid/hcp/clinical-care/underlying-conditions.html> 6. CDC. Benefits of the flu vaccine. August 14, 2024. Accessed November 13, 2024. <https://www.cdc.gov/flu-vaccines-work/benefits/index.html> 7. CDC. Benefits of getting vaccinated. September 3, 2024. Accessed November 14, 2024. <https://www.cdc.gov/covid/vaccines/benefits.html> 8. CDC. COVID-19 vaccination. Accessed November 14, 2024. <https://www.cdc.gov/museum/pdf/cdm-pha-stem-lesson-covid-19-vaccination-lesson.pdf> 9. CDC. Talking about influenza vaccine recommendation. September 17, 2024. Accessed December 3, 2024. <https://www.cdc.gov/flu/hcp/vax-summary/flu-vaccine-recommendation.html>

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# RSV

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## PATIENT FACING MATERIALS

### RSV Infants

Target Audience: Parents, caregivers of young children, and expectant mothers.

Objective: This material informs about RSV risks, symptoms, transmission, and prevention.

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### RSV Poses Serious Risks for Infants and Young Children:<sup>1</sup>

Each year in the United States, an estimated **58,000-80,000 children younger than 5 years are hospitalized due to RSV infection.**

#### Children at greatest risk for severe illness from RSV include:

- Premature infants
- Infants up to 12 months (especially under 6 months)
- Children under 2 years old with chronic lung or heart conditions
- Children with weakened immune systems
- Children who have neuromuscular disorders affecting swallowing or clearing mucus secretions
- Children with cystic fibrosis who have severe lung disease
- American Indian and Alaska Native children

### Stay Informed: Identify RSV Symptoms<sup>1</sup>

RSV may not be severe when it first starts. However, it can become more severe a few days into the illness. Early symptoms of RSV may include:



Infants who get an RSV infection almost always show symptoms. This is different from adults, who can sometimes get RSV infections and not have symptoms. In very young infants (less than 6 months old), the symptoms of RSV infection may include:



### Preventive Options to Protect Babies from Severe RSV:<sup>1</sup>

<b>Who is it Given To?</b>	Infants & Young Children	Pregnant People
<b>Type of Product</b>	RSV antibody given to infant	RSV maternal immunization given during pregnancy
<b>Is It for Everyone in Group?</b>	Infants younger than 8 months and born during, or entering, RSV season. Also, high-risk children between ages 8 and 19 months entering their second RSV season.	Recommended if you are 32-36 weeks pregnant during September-January

### Severe RSV<sup>1</sup>

Virtually all children get an RSV infection by the time they are 2 years old. Most of the time RSV will cause a mild, cold-like illness, but it can also cause severe illness such as:

- Bronchiolitis (inflammation of the small airways in the lung)
  - Pneumonia (infection of the lungs)
- 2-3 out of every 100 Infants with RSV infection may need to be hospitalized.**

### How RSV Spreads: Understanding Its Transmission<sup>1</sup>

- When an infected individual coughs or sneezes.
- When you come into contact with virus-laden droplets from a cough or sneeze, reaching your eyes, nose, or mouth.
- Through direct contact with the virus, such as kissing the face of an RSV-infected child.
- When you touch a surface contaminated with the virus, such as a doorknob, and subsequently touch your face before handwashing.

**Ask your Health Care Professional about RSV Immunization today!**

Reference: 1. Centers for Disease Control and Prevention. RSV in Infants and Young Children. Updated January 18, 2024. Accessed January 25, 2024. <https://www.cdc.gov/rsv/high-risk/infants-young-children.html#early-symptoms>.

# RSV

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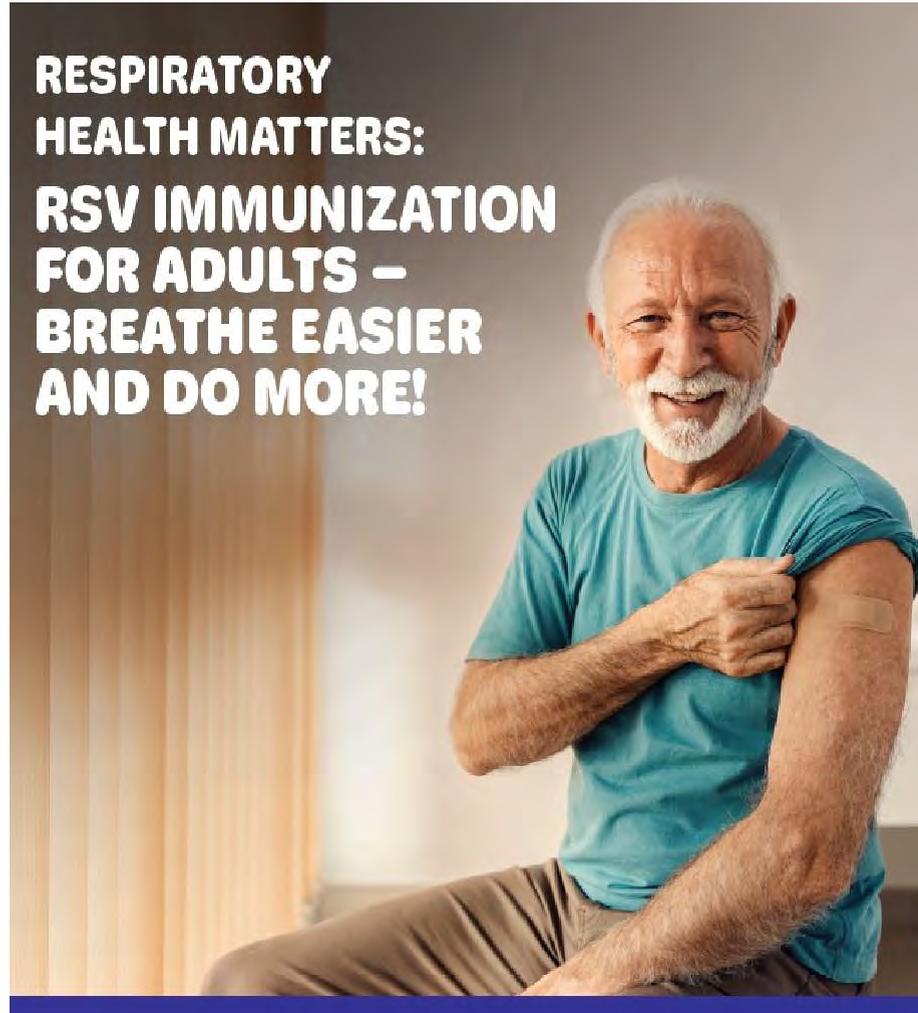
## PATIENT FACING MATERIALS RSV Older Adults

Target Audience: Older adults and individuals with chronic medical conditions or weakened immune systems.

Objective: This material educates older adults on RSV risks, symptoms, complications, and the importance of vaccination.

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### RESPIRATORY HEALTH MATTERS: RSV IMMUNIZATION FOR ADULTS – BREATHE EASIER AND DO MORE!



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MAT-US-231161-v1.0-02/2024

#### RSV Poses Serious Risks for the Elderly and the Vulnerable Populations:<sup>1</sup>

Respiratory syncytial (sin-SISH-uhl) virus, or RSV, is a common respiratory virus that usually causes mild, cold-like symptoms.

##### Adults at highest risk for severe RSV infection include:

- Older adults
- Adults with chronic heart or lung disease
- Adults with weakened immune systems
- Adults with certain other underlying medical conditions
- Adults living in nursing homes or long-term care facilities

Each year, it is estimated that between **60,000-160,000 older adults in the United States are hospitalized**, and **6,000-10,000 die due to RSV infection.**

#### Severe RSV Infection<sup>1</sup>

RSV can sometimes also lead to worsening of serious conditions such as:

- Asthma
- Chronic obstructive pulmonary disease (COPD) – a chronic disease of the lungs that makes it hard to breathe
- Congestive heart failure – when the heart can't pump enough blood and oxygen through the body

Older adults are at greater risk than young adults for serious complications from RSV because our immune systems weaken when we are older.



Ask your Health Care Professional about RSV Immunization today!

#### Stay Informed: Identify RSV Symptoms<sup>1</sup>

People infected with RSV typically show symptoms within **4 to 6 days** after getting infected. Symptoms of RSV infection may include:



Runny Nose    Decrease in appetite    Coughing



Sneezing    Fever    Wheezing

These symptoms usually appear in stages and not all at once. Adults with RSV usually experience mild cold-like symptoms, though some can develop lung infections or pneumonia.

#### Help Prevent RSV Transmission<sup>1</sup>

- Stay home when sick.
- Cover your coughs and sneezes with a tissue or your shirt sleeve, not your hands.
- Wash your hands often with soap and water for at least 20 seconds.
- Avoid touching your face with unwashed hands.
- Avoid close contact with others, such as kissing, shaking hands, and sharing cups and eating utensils.
- Clean frequently touched surfaces such as doorknobs and mobile devices.

#### CDC Recommends RSV Immunization for Older Adults:<sup>1</sup>

- Adults aged 60 years and older may receive a single dose of an RSV immunization.
- Talk to your health care professional to see if immunization is right for you.

Reference: 1. Centers for Disease Control and Prevention. RSV in Older Adults with Chronic Medical Conditions. Updated January 18, 2024. Accessed January 25, 2024. <https://www.cdc.gov/rsv/high-risk/older-adults.html>

# RSV

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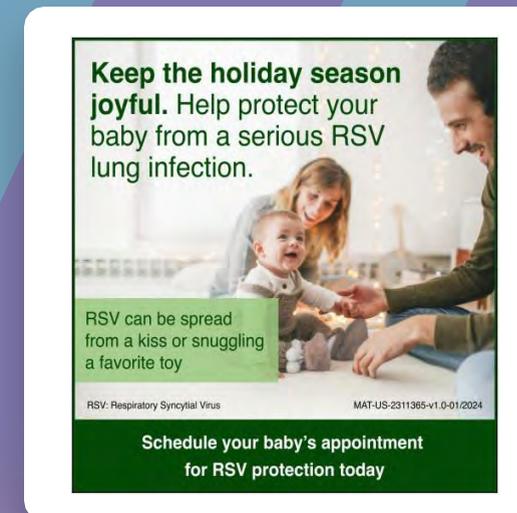
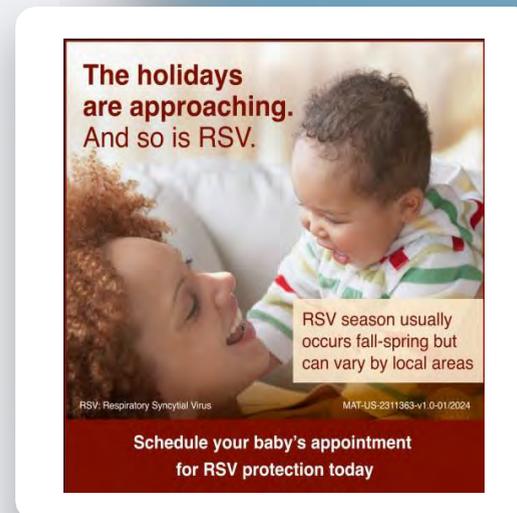
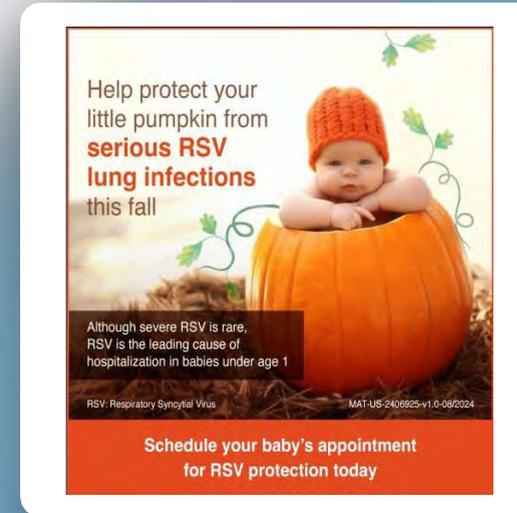
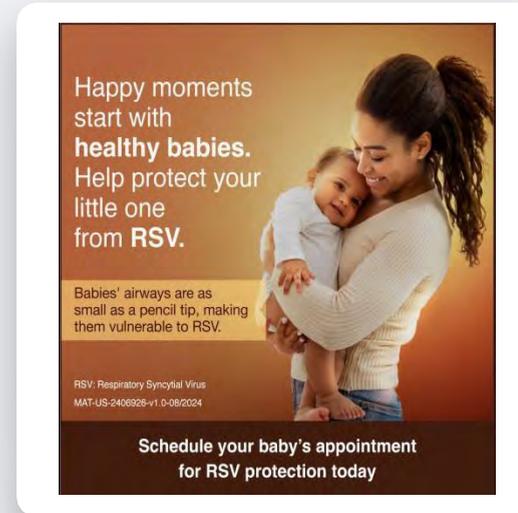


## PATIENT FACING MATERIALS RSV Social Posts

Target Audience: Parents and caregivers of infants under 12 months, especially new or expecting parents and those approaching RSV season.

Objective: This material raises awareness of RSV risks in infants, highlights seasonal relevance, and encourages parents to talk to healthcare providers about immunization.

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# TRAVEL

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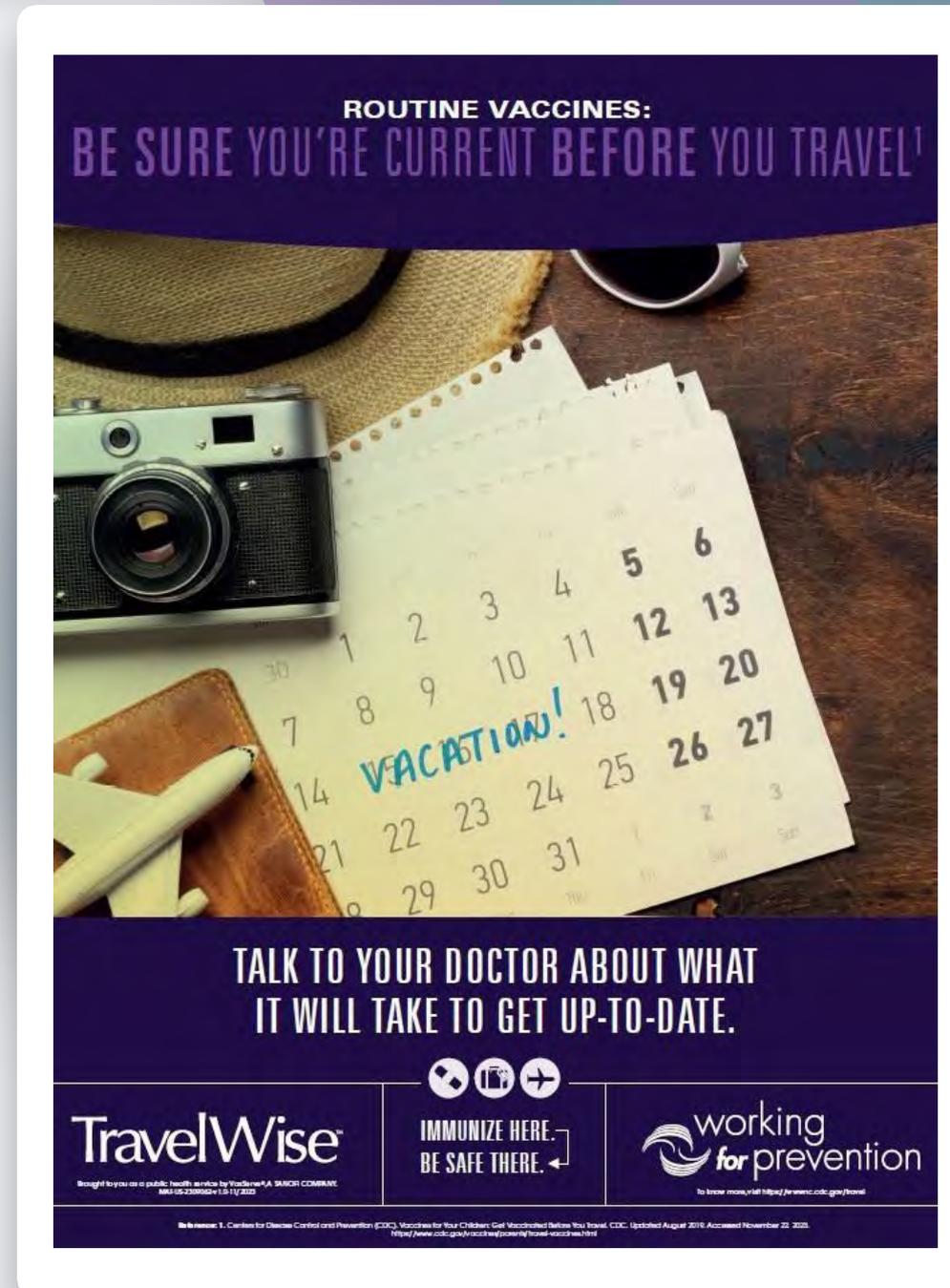


## PATIENT FACING MATERIALS Before You Travel

Target Audience: International travelers, including families, students, volunteers, and those with health concerns.

Objective: This material encourages travelers to get recommended vaccines before departure to help stay protected from preventable diseases abroad.

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## TRAVEL

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### PATIENT FACING MATERIALS Travel Corporate Poster

Target Audience: Business professionals, executives, and employees traveling internationally for work.

Objective: This material encourages business travelers to consult healthcare providers about required vaccines to help stay protected during international trips.

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# TRAVEL

01



## PATIENT FACING MATERIALS Travel Disease Map Flashcard

Target Audience: International travelers, especially those visiting regions with a high risk of infectious diseases, to help them understand the importance of pre-travel vaccination.

Objective: This material informs travelers about destination-specific health risks and vaccines. It offers expert contact information for personalized travel health advice.

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**WHEREVER YOU TRAVEL,**  
**TravelWise**

**IMMUNIZE HERE,**  
**BE SAFE THERE.**

**working**  
**for prevention**

DISEASE	DESTINATION	
<p><b>YELLOW FEVER<sup>1,2</sup></b></p> <p>A serious and possibly deadly viral disease (transmitted by mosquitoes) that causes fever, chills, headache, back and muscle aches, nausea, vomiting, and bleeding.<sup>3</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Yellow Fever, CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>HEPATITIS B<sup>1,3,4</sup></b></p> <p>A viral infection that causes tiredness, loss of appetite, nausea, vomiting, abdominal pain, and yellowing of the skin and whites of the eyes; in some cases, joint pain may occur. Hepatitis B can also cause of chronic hepatitis, liver failure, and liver cancer. For some, these complications can cause premature death.<sup>5,6</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Hepatitis B, CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>RABIES<sup>1,7</sup></b></p> <p>A deadly viral infection that causes fever, inflammation of the brain, anxiety, muscle weakness, paralysis, confusion, convulsions, and coma. Once symptoms develop, death is almost always inevitable.<sup>8</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: World Health Organization, Rabies: Presence of dog-bitten human rabies; 2021<sup>7</sup> and Centers for Disease Control and Prevention (CDC), Travelers' Health<sup>8</sup></p>
<p><b>TYPHOID FEVER<sup>1,9,10</sup></b></p> <p>A severe and possibly deadly bacterial infection that causes tiredness, fever, loss of appetite, headache, abdominal pain, and skin rash; may lead to intestinal bleeding that can be life-threatening.<sup>11</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Typhoid &amp; Paratyphoid Fever, CDC Yellow Book 2024<sup>1</sup> and SDO 2017 Typhoid and Paratyphoid Collaborators, Lancet Infect Dis. 2018;18(4):369-381.<sup>10</sup></p>
<p><b>JAPANESE ENCEPHALITIS<sup>12</sup></b></p> <p>A potentially deadly viral infection transmitted by mosquitoes that can cause inflammation of the brain, fever, headache, vomiting, weakness, paralysis, tremors, and seizures.<sup>13</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Japanese Encephalitis, CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>INFLUENZA<sup>14</sup></b></p> <p>A viral infection that causes fever, muscle aches, headache, non-productive cough, and sore throat; complications include pneumonia or exacerbation of underlying medical conditions. The risk of severe illness and death increases for those aged ≥65 years.<sup>15</sup></p>		<p><b>INFLUENZA RISK VARIES BY LOCATION AND SEASON</b></p> <ul style="list-style-type: none"> <li>● All year*</li> <li>● October-May</li> <li>● April-September</li> </ul> <p>* Infection with influenza virus may occur throughout the year in tropical and subtropical areas.<sup>14</sup></p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Influenza, CDC Yellow Book 2024.<sup>1</sup></p>

**KNOW WHERE THE RISKS ARE AND HOW TO BE SAFE!**  
Work with your travel health specialist to decide which preventive measures are necessary before traveling. For more information, be sure to visit: <http://www.cdc.gov/travel>

Name of travel health specialist \_\_\_\_\_

Phone number \_\_\_\_\_

DISEASE	DESTINATION	
<p><b>MENINGOCOCCAL MENINGITIS<sup>16</sup></b></p> <p>A bacterial infection that causes headache, fever, stiffness of the neck, nausea, vomiting, and rash; may lead to multi-organ failure or death.<sup>17</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Meningococcal Disease, CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>HEPATITIS A<sup>13,15</sup></b></p> <p>A viral disease that can cause fever, loss of appetite, nausea, abdominal discomfort, and—rarely—liver failure.<sup>18</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Morbidity and Mortality Weekly Report (MMWR)<sup>13</sup> and Jefferson M, et al. World J Clin Cases. 2018;9(13):268-293.<sup>15</sup></p>
<p><b>TETANUS, DIPHTHERIA, AND PERTUSSIS<sup>16,19</sup></b></p> <p>Bacterial infections that can cause various symptoms<sup>20-22</sup>.  <b>Tetanus:</b> muscle spasms and death.<sup>20</sup>  <b>Diphtheria:</b> fever, difficulty swallowing, loss of appetite, and death.<sup>21</sup>  <b>Pertussis:</b> coughing and cough-induced vomiting. Disease is more severe in infants. Some may stop breathing, and overall, 1% die.<sup>22</sup></p>		<p>● Pertussis and diphtheria occur in many areas of the world. Tetanus spores are found in soil worldwide.<sup>19-20</sup></p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>MALARIA<sup>14,21</sup></b></p> <p>A parasitic infection transmitted by mosquitoes that causes fever, chills and headache, may cause nausea, kidney failure, acute respiratory distress syndrome, coma, or death.<sup>22,23</sup></p>		<p>● Increased risk area</p> <p>● Malaria cannot be prevented by vaccination<sup>24</sup> Ask your travel health provider if you need prescription medicine to help prevent malaria.<sup>25</sup></p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Malaria, CDC Yellow Book 2024.<sup>1</sup></p>
<p><b>POLIO<sup>1,22,23</sup></b></p> <p>A viral infection that can cause paralysis, respiratory failure, and—rarely—death.<sup>24</sup></p>		<p>● Vaccination may be necessary before travel</p> <p>Map adapted from: Centers for Disease Control and Prevention (CDC), Travelers' Health-Global Polio.<sup>25</sup></p>

References: 1. World Health Organization. International Travel and Health. Chapter 8 - Vaccine-preventable diseases and vaccines (2018 update). WHO. Accessed January 18, 2024. [https://cdo.who.int/world/jacc/default.aspx?documentid=emergency-travel-advice/travel-chapter-8-vaccines\\_cc21807-75dc-4037-45b7-42e0a171474.pdf?sfvrsn=265173b\\_4\\_2](https://cdo.who.int/world/jacc/default.aspx?documentid=emergency-travel-advice/travel-chapter-8-vaccines_cc21807-75dc-4037-45b7-42e0a171474.pdf?sfvrsn=265173b_4_2). 2. Centers for Disease Control and Prevention (CDC). Yellow Fever. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/yellow-fever>. 3. Centers for Disease Control and Prevention (CDC). Hepatitis B. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/hepatitis-b>. 4. World Health Organization. Hepatitis - Symptoms. Accessed January 18, 2024. [https://www.who.int/health-topics/hepatitis#tab=tab\\_2\\_5](https://www.who.int/health-topics/hepatitis#tab=tab_2_5). 5. Centers for Disease Control and Prevention (CDC). Rabies. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/rabies>. 6. World Health Organization. Rabies: Presence of dog-bitten human rabies - 2021. Accessed January 18, 2024. <https://apps.who.int/iris/handle/10665/113103>. 7. Centers for Disease Control and Prevention (CDC). Travelers' Health. Accessed January 18, 2024. <https://www.cdc.gov/travel/>. 8. Centers for Disease Control and Prevention (CDC). Typhoid & Paratyphoid Fever. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/typhoid-and-paratyphoid-fever>. 9. SDO 2017 Typhoid and Paratyphoid Collaborators. The global burden of typhoid and paratyphoid fever: a systematic analysis for the Global Burden of Disease Study 2017. Lancet Infect Dis. 2018;18(4):369-381. 10. Centers for Disease Control and Prevention (CDC). Japanese Encephalitis. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/japanese-encephalitis>. 11. Centers for Disease Control and Prevention (CDC). Influenza. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/influenza>. 12. Centers for Disease Control and Prevention (CDC). Meningococcal Disease. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/meningococcal-disease>. 13. Centers for Disease Control and Prevention (CDC). Hepatitis A. CDC Yellow Book 2024. CDC. Updated January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/hepatitis-a>. 14. Centers for Disease Control and Prevention (CDC). Morbidity and Mortality Weekly Report (MMWR). CDC. Updated February 2021. Accessed January 18, 2024. <https://www.cdc.gov/mmwr/preview/mmwrhtml/6001a1.htm>. 15. Jefferson M, Lam T, Bhatia S. Update on global epidemiology of viral hepatitis and preventive strategies. World J Clin Cases. 2018;9(13):268-293. 16. Centers for Disease Control and Prevention (CDC). Tetanus. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/tetanus>. 17. Centers for Disease Control and Prevention (CDC). Diphtheria. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/diphtheria>. 18. Centers for Disease Control and Prevention (CDC). Pertussis / Whooping Cough. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/pertussis-whooping-cough>. 19. Centers for Disease Control and Prevention (CDC). Malaria. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/malaria>. 20. Centers for Disease Control and Prevention (CDC). Polio. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/polio>. 21. Centers for Disease Control and Prevention (CDC). Polio. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/polio>. 22. Centers for Disease Control and Prevention (CDC). Polio. CDC Yellow Book 2024. CDC. Updated May 2023. Accessed January 18, 2024. <https://www.cdc.gov/travel/yellowbook/2024/infectious-diseases/polio>. 23. Centers for Disease Control and Prevention (CDC). 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# TRAVEL

01



## PATIENT FACING MATERIALS Travel Disease Map Poster

Target Audience: Health-conscious travelers concerned about safety and well-being during travel.

Objective: To encourage travelers to consult a travel health specialist to identify necessary vaccines, medications, and precautions before their trip.

Click on the image to download the asset.

**WHEREVER YOU TRAVEL, TravelWise** | **IMMUNIZE HERE. BE SAFE THERE.** | **working for prevention**

### KNOW WHERE THE RISKS ARE

<p><b>RABIES<sup>1,2</sup></b> A deadly viral infection that causes fever, inflammation of the brain, anxiety, muscle weakness, paralysis, confusion, convulsions, and coma. Once symptoms develop, death is almost always inevitable.<sup>1</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, World Bank, Division of Field Epidemiology, Center for Disease Control and Prevention (CDC), National Health Service.</small></p>	<p><b>MENINGOCOCCAL MENINGITIS<sup>3</sup></b> A bacterial infection that causes headache, fever, stiffness of the neck, nausea, vomiting, and rash; may lead to multi-organ failure or death.<sup>4</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), The Centers for Disease Control and Prevention (CDC), National Health Service.</small></p>	<p><b>INFLUENZA<sup>5</sup></b> A viral infection that causes fever, muscle aches, headache, nonproductive cough, and sore throat; complications include pneumonia or exacerbation of underlying medical conditions. The risk of severe illness and death increases for those aged ≥65 years.<sup>6</sup></p> <p><b>INFLUENZA RISK VARIES BY LOCATION AND SEASON</b></p> <ul style="list-style-type: none"> <li>▣ All year</li> <li>▣ Winter only</li> <li>▣ Spring/Summer</li> </ul> <p><small>Centers for Disease Control and Prevention (CDC), National Health Service, World Health Organization, The World Bank, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>
<p><b>HEPATITIS A<sup>1,7-9</sup></b> A viral disease that can cause fever, loss of appetite, nausea, abdominal discomfort, and—rarely—liver failure.<sup>10</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC, National Health Service, CDC.</small></p>	<p><b>HEPATITIS B<sup>1,10</sup></b> A viral infection that causes tiredness, loss of appetite, nausea, vomiting, abdominal pain, and yellowing of the skin and whites of the eyes; in some cases, liver can may occur. Hepatitis B can also cause chronic hepatitis, liver failure, and liver cancer. For some, these complications can cause premature death.<sup>11</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>	<p><b>TYPHOID FEVER<sup>1,12,13</sup></b> A serious and possibly deadly bacterial infection that causes fever, loss of appetite, headache, abdominal pain, and skin rash; may lead to intestinal bleeding that can be life-threatening.<sup>14</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC, National Health Service, CDC.</small></p>
<p><b>TETANUS, DIPHTHERIA, AND PERTUSSIS<sup>1,15-18</sup></b> Bacterial infections that cause various symptoms: Tetanus: muscle spasms and death.<sup>19</sup> Diphtheria: fever, difficulty swallowing, loss of appetite, and death.<sup>20</sup> Pertussis: coughing and cough-induced vomiting. Disease is more severe in infants. Some may stop breathing, and die.<sup>21</sup></p> <p>▣ Tetanus and diphtheria occur in areas around the world. Pertussis is common in all areas.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>	<p><b>POLIO<sup>1,16,17</sup></b> A viral infection that can cause paralysis, respiratory failure, and—rarely—death.<sup>18</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>	<p><b>YELLOW FEVER<sup>1,18</sup></b> A serious and possibly deadly viral disease (transmitted by mosquitoes) that causes fever, chills, headache, back and muscle aches, nausea, vomiting, and bleeding.<sup>19</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>
<p><b>MALARIA<sup>19,20</sup></b> A parasitic infection transmitted by mosquitoes that causes fever, chills, and headache; may cause seizures, kidney failure, acute respiratory distress syndrome, coma, or death.<sup>21</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>	<p><b>JAPANESE ENCEPHALITIS<sup>1,21</sup></b> A serious and possibly deadly bacterial infection that causes fever, loss of appetite, headache, abdominal pain, and skin rash; may lead to intestinal bleeding that can be life-threatening.<sup>22</sup></p> <p>▣ Immunization may be necessary before travel.</p> <p><small>The World Health Organization, Center for Disease Control and Prevention (CDC), National Health Service, CDC.</small></p>	<p>Work with your travel health specialist to decide which preventive measures are necessary before traveling. For more information, be sure to visit: <a href="http://www.cdc.gov/travel">http://www.cdc.gov/travel</a></p>

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# TRAVEL

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## PATIENT FACING MATERIALS Travel Patient Information

Target Audience: International travelers, particularly those visiting high-risk regions.

Objective: The material informs travelers about health risks, offers essential tips, emphasizes the importance of vaccinations, and promotes preventive steps for a safe and healthy trip.

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# TRAVEL

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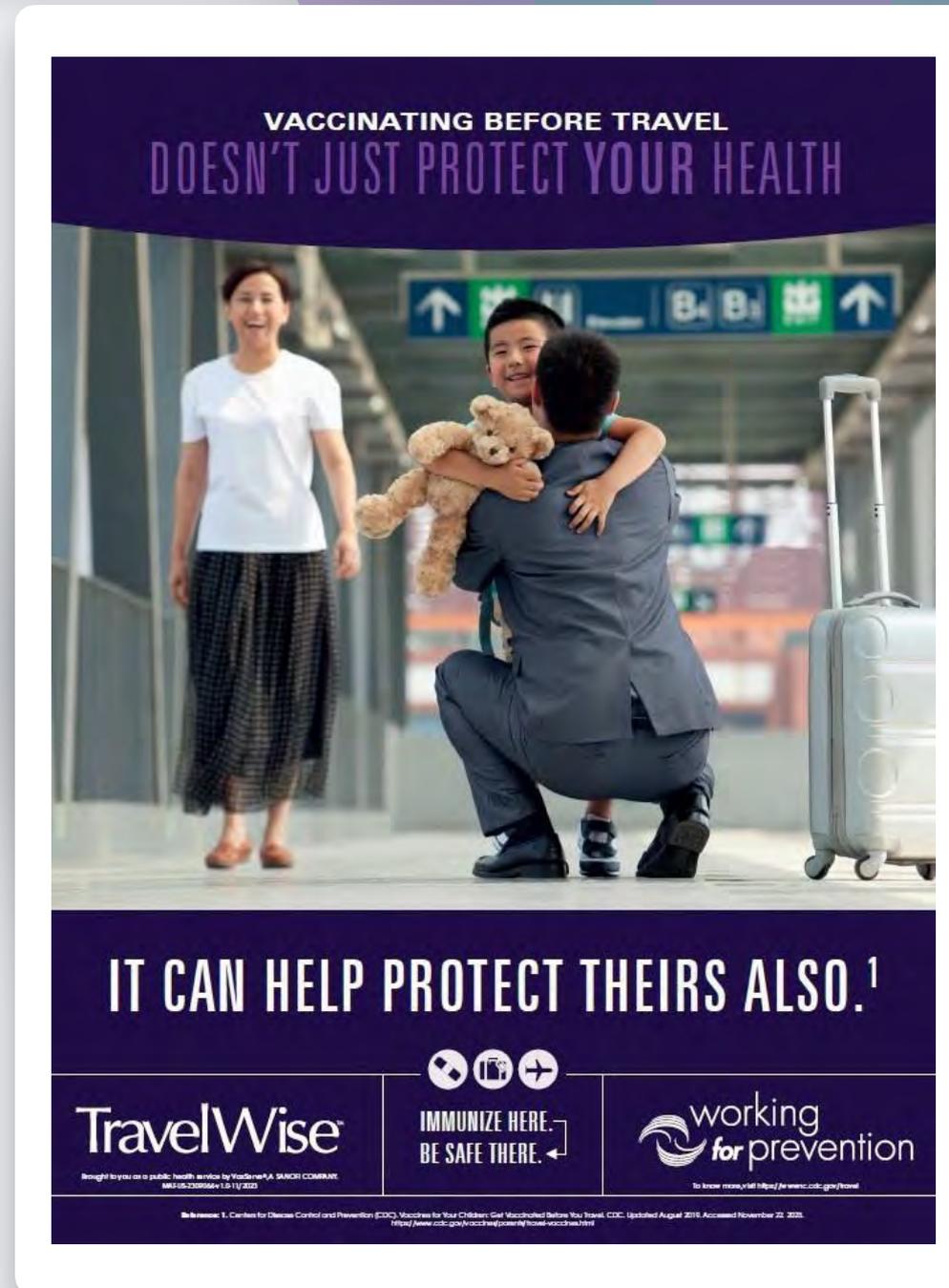
## PATIENT FACING MATERIALS

### Travel Poster Protect Their Health

Target Audience: International travelers, particularly those visiting high-risk regions who seek to protect themselves and others.

Objective: This poster highlights the importance of pre-travel vaccination to help protect travelers and prevent the spread of disease during and after international trips.

[Click on the image to download the asset.](#)



## TRAVEL

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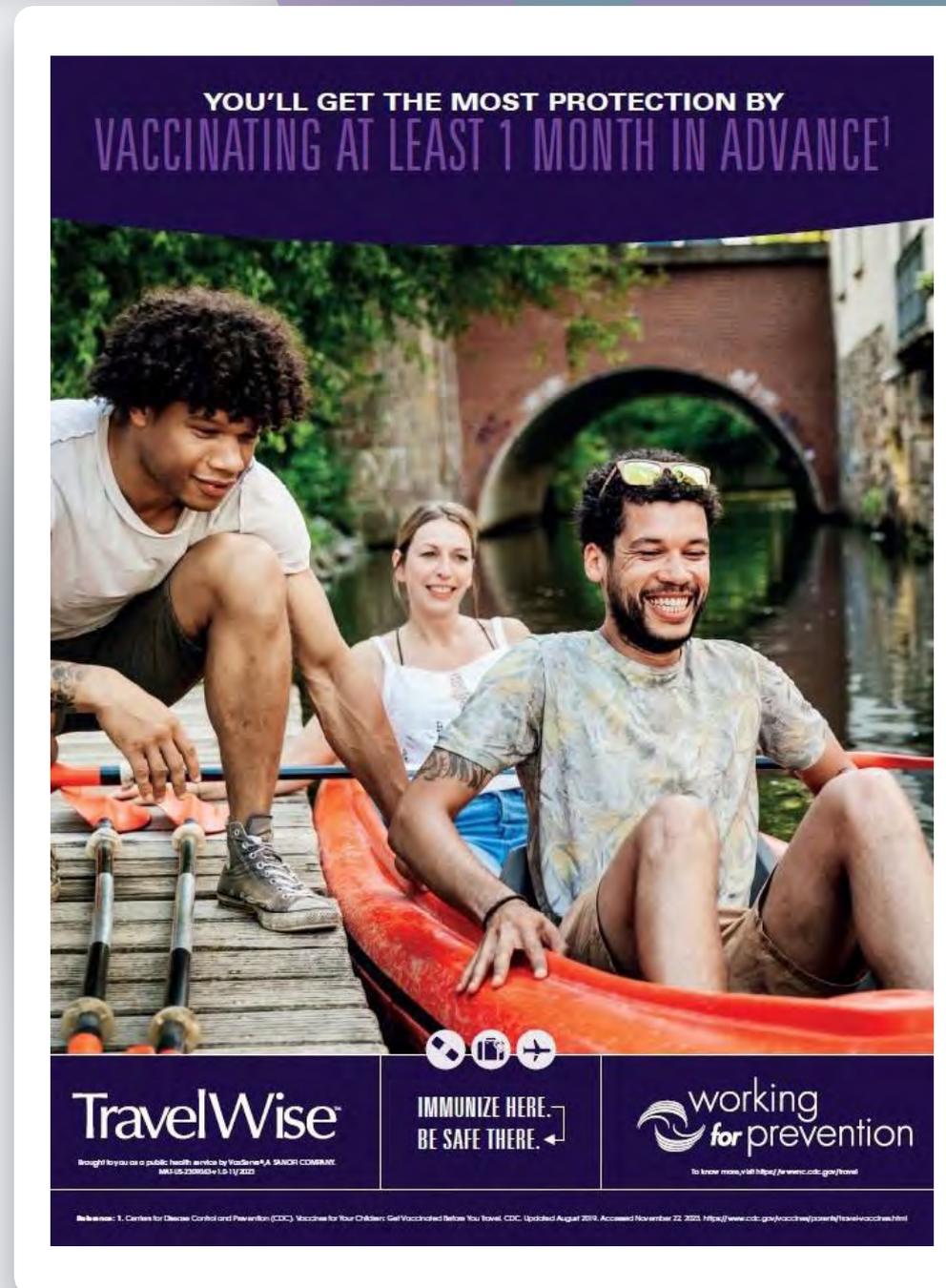
### PATIENT FACING MATERIALS

#### Travel Vaccinate 1 Month in Advance

Target Audience: International vacationers, families, and health-conscious travelers visiting destinations with health risks.

Objective: This material reminds travelers to get vaccinated at least one month before departure to help stay protected during their trip.

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# TRAVEL

01



## PATIENT FACING MATERIALS Travel Vaccine Information

Target Audience: International travelers—tourists, business travelers, and visitors to high-risk areas—who want to protect themselves and local communities.

Objective: This brochure aims to inform travelers about health risks and the importance of destination-based vaccinations, encouraging proactive steps for a healthy, hassle-free trip.

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**YOUR ITINERARY SHOULDN'T INCLUDE GETTING SICK**

**TRAVELING ABROAD CAN BE AN EXCITING ADVENTURE**

**STAY HEALTHY & SAFE DURING TRAVEL** by knowing the health risks involved in visiting certain countries.<sup>1</sup>

**Vaccinations may help you avoid specific infectious diseases you may encounter during international travel.<sup>1</sup>**

TravelWise **WORKING TOGETHER TO BE SAFE TOGETHER.** working for prevention

**UNDERSTANDING THE RISKS HELPS YOU AVOID THEM**

Depending on where you travel in the world, you may be exposed to certain infectious diseases.<sup>1</sup>

Travel vaccines can help protect you from many of these diseases.<sup>1</sup> Don't take the risk of your trip getting ruined by illness. Be sure to get vaccinated here so you can enjoy your time there.

The table below features several diseases for which you should consider vaccinations if you plan to travel to certain destinations.

Use this checklist to help keep track of your travel vaccinations.

DISEASE	DESTINATION
<input type="checkbox"/> <b>YELLOW FEVER</b> <sup>1,2</sup> A serious and possibly deadly viral disease (transmitted by mosquitoes) that causes fever, chills, headache, back and muscle aches, nausea, vomiting, and bleeding. <sup>2</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Yellow Fever. CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>HEPATITIS B</b> <sup>1,3,4</sup> A viral infection that causes tiredness, loss of appetite, nausea, vomiting, abdominal pain, and yellowing of the skin and whites of the eyes. In some cases, joint pain may occur. Hepatitis B can also cause of chronic hepatitis, liver failure, and liver cancer. For some, these complications can cause premature death. <sup>3,4</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Hepatitis B. CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>RABIES</b> <sup>1,5-7</sup> A deadly viral infection that causes fever, inflammation of the brain, anxiety, muscle weakness, paralysis, confusion, convulsions, and coma. Once symptoms develop, death is almost always inevitable. <sup>8</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: World Health Organization. Rabies: Presence of dog-transmitted human rabies (2021) and context for disease control and prevention (CDC), Traveler's Health. <sup>1</sup>
<input type="checkbox"/> <b>TYPHOID FEVER</b> <sup>1,9,10</sup> A severe and possibly deadly bacterial infection that causes tiredness, fever, loss of appetite, headache, abdominal pain, and skin rash; may lead to intestinal bleeding that can be life-threatening. <sup>9</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Typhoid & Paratyphoid Fever. CDC Yellow Book 2024 and GBD 2017 Typhoid and Paratyphoid Collaborators. Lancet Infect Dis. 2018;18(4):389-391. <sup>1</sup>
<input type="checkbox"/> <b>JAPANESE ENCEPHALITIS</b> <sup>1,11</sup> A potentially deadly viral infection transmitted by mosquitoes that can cause inflammation of the brain, fever, headache, vomiting, weakness, paralysis, tremors, and seizures. <sup>12</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Japanese Encephalitis. CDC Yellow Book 2024. <sup>1</sup>

DISEASE	DESTINATION
<input type="checkbox"/> <b>INFLUENZA</b> <sup>11</sup> A viral infection that causes fever, muscle aches, headache, nonproductive cough, and sore throat; complications include pneumonia or exacerbation of underlying medical conditions. The risk of severe illness and death increases for those aged ≥65 years. <sup>11</sup>	<b>INFLUENZA RISK VARIES BY LOCATION AND SEASON</b> <b>All year</b> ● October-May ● April-September * Infection with influenza virus may occur throughout the year in tropical and subtropical areas. <sup>11</sup> Map adapted from: Centers for Disease Control and Prevention (CDC), Influenza. CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>MENINGOCOCCAL MENINGITIS</b> <sup>12</sup> A bacterial infection that causes headache, fever, stiffness of the neck, nausea, vomiting, and rash; may lead to multi-organ failure or death. <sup>12</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Meningococcal Disease. CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>HEPATITIS A</b> <sup>1,13-15</sup> A viral disease that can cause fever, loss of appetite, nausea, abdominal discomfort, and—rarely—liver failure. <sup>12</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Morbidity and Mortality Weekly Report (MMWR) and Jeffries M, et al. World J Clin Cases. 2016;6(1):19-58-59. <sup>1</sup>
<input type="checkbox"/> <b>TETANUS, DIPHTHERIA, AND PERTUSSIS</b> <sup>1,16-18</sup> Bacterial infections that can cause various symptoms. <sup>16-18</sup> <b>Tetanus:</b> muscle spasms and death. <sup>18</sup> <b>Diphtheria:</b> fever, difficulty swallowing, loss of appetite, and death. <sup>17</sup> <b>Pertussis:</b> coughing and cough-induced vomiting. Disease is more severe in infants. Some may stop breathing, and overall, 1% die. <sup>18</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>MALARIA</b> <sup>19,21</sup> A parasitic infection transmitted by mosquitoes that causes fever, chills and headache; may cause seizures, kidney failure, acute respiratory distress syndrome, coma, or death. <sup>19,21</sup>	<b>Increased risk area</b> * Malaria cannot be prevented by vaccination. <sup>19</sup> Ask your travel health provider if you need prescription medicine to help prevent malaria. <sup>19</sup> Map adapted from: Centers for Disease Control and Prevention (CDC), Malaria. CDC Yellow Book 2024. <sup>1</sup>
<input type="checkbox"/> <b>POLIO</b> <sup>1,22,23</sup> A viral infection that can cause paralysis, respiratory failure, and—rarely—death. <sup>22</sup>	<b>Vaccination may be necessary before travel.</b> Map adapted from: Centers for Disease Control and Prevention (CDC), Polio. <sup>1</sup>

**WE'RE HERE TO HELP YOU PREPARE FOR YOUR TRIP**

Vaccinating is an important step to take before you travel.<sup>1</sup>

Ask a member of our team about the specific vaccinations recommended or required for your international travel destination.

References: 1. World Health Organization. International Travel and Health. Chapter 9. Vaccine-preventable diseases and prevention (2021 update). WHO. Accessed January 18, 2024. <https://apps.who.int/iris/handle/10665/330444>. 2. Centers for Disease Control and Prevention (CDC). Yellow Fever. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowfever/>. 3. Centers for Disease Control and Prevention (CDC). Hepatitis B. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/hepatitis/b/>. 4. Centers for Disease Control and Prevention (CDC). Hepatitis B. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/hepatitis/b/>. 5. World Health Organization. Rabies: Symptoms. Accessed January 18, 2024. <https://www.who.int/news-room/fact-sheets/detail/rabies>. 6. World Health Organization. Rabies: Symptoms. Accessed January 18, 2024. <https://www.who.int/news-room/fact-sheets/detail/rabies>. 7. Centers for Disease Control and Prevention (CDC). Traveler's Health. Accessed January 18, 2024. <https://www.cdc.gov/travel/>. 8. Centers for Disease Control and Prevention (CDC). Rabies. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/rabies/>. 9. Centers for Disease Control and Prevention (CDC). Typhoid & Paratyphoid Fever. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/typhoid-and-paratyphoid-fever/>. 10. Global burden of typhoid and paratyphoid fevers: a systematic analysis for the Global Burden of Disease Study 2017. Lancet Infect Dis. 2018;18(4):389-391. 11. Centers for Disease Control and Prevention (CDC). Japanese Encephalitis. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/japanese-encephalitis/>. 12. Centers for Disease Control and Prevention (CDC). Meningococcal Disease. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/meningococcal-disease/>. 13. Centers for Disease Control and Prevention (CDC). Hepatitis A. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/hepatitis-a/>. 14. Centers for Disease Control and Prevention (CDC). Hepatitis A. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/hepatitis-a/>. 15. Centers for Disease Control and Prevention (CDC). Morbidity and Mortality Weekly Report (MMWR). CDC. Updated February 2023. Accessed January 18, 2024. <https://www.cdc.gov/mmwr/index.html>. 16. Jeffries M, Rafti R, Rafti R, Lam T, Helle S. Update on global epidemiology of and vaccines for pertussis. Hum Vaccin Immunother. 2018;14(12):2889-2900. 17. Centers for Disease Control and Prevention (CDC). Tetanus. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/tetanus/>. 18. Centers for Disease Control and Prevention (CDC). Tetanus. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/tetanus/>. 19. Centers for Disease Control and Prevention (CDC). Malaria. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/malaria/>. 20. Centers for Disease Control and Prevention (CDC). Polio. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/polio/>. 21. Centers for Disease Control and Prevention (CDC). Polio. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/polio/>. 22. Centers for Disease Control and Prevention (CDC). Polio. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/polio/>. 23. Centers for Disease Control and Prevention (CDC). Polio. CDC Yellow Book 2024. Accessed January 18, 2024. <https://www.cdc.gov/yellowbook/2024/polio/>.

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## BACK TO SCHOOL

01



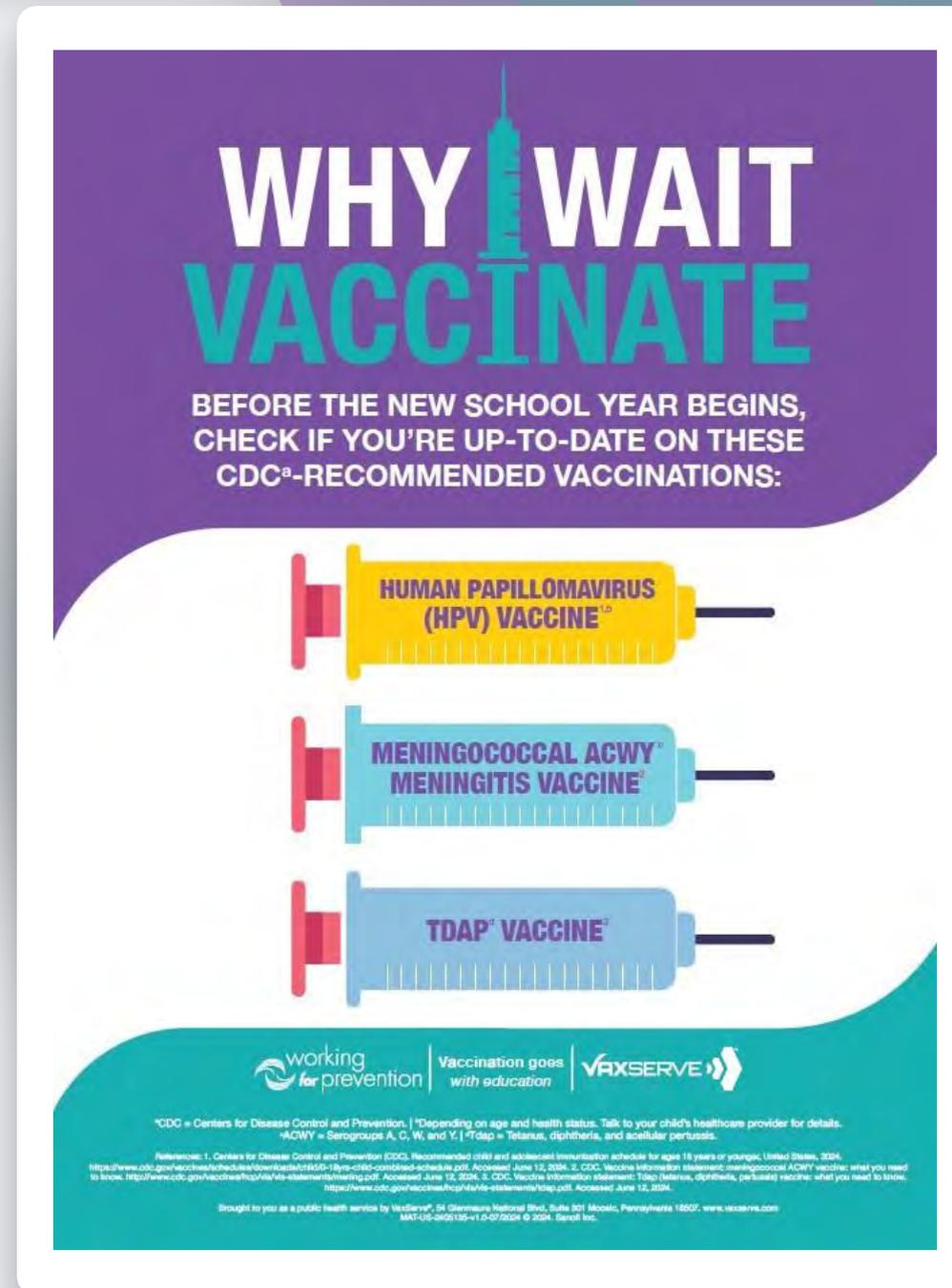
### PATIENT FACING MATERIALS

#### Working for Prevention Back to School Poster

Target Audience: Parents and caregivers of school-aged children, adolescents, and young adults entering or returning to school.

Objective: The material is to encourage timely vaccination before the school year to protect against preventable diseases, supporting individual and public health in school communities.

Click on the image to download the asset.



# BACK TO SCHOOL

01



## PATIENT FACING MATERIALS

### Working for Prevention Back to School Brochure

Target Audience: Parents and caregivers of school-aged children, adolescents, and young adults entering or returning to school.

Objective: The material encourages timely vaccination against HPV, meningococcal meningitis, and whooping cough to ensure protection and compliance with CDC recommendations before the school year begins.

Click on the image to download the asset.

Stay up-to-date on CDC-recommended vaccinations below:

**HPV**

Adolescents 11 or 12 years of age are recommended to receive **2 doses** of HPV vaccine.<sup>1</sup> Some individuals, depending on age and health status, are recommended to receive 3 doses.<sup>1</sup>

○ Date: \_\_\_\_\_

○ Date: \_\_\_\_\_

○ Date: \_\_\_\_\_

**MENINGOCOCCAL MENINGITIS**

Adolescents are recommended to receive **2 doses** of protection against MenACWY – the first dose at 11 or 12 years of age and a booster dose at age 16.<sup>1</sup>

○ Date: \_\_\_\_\_

○ Date: \_\_\_\_\_

**WHOOPING COUGH**

Adolescents and young adults are recommended to receive **1 dose** of Tdap vaccine.<sup>1</sup>

○ Date: \_\_\_\_\_

**HELP PROTECT YOURSELF.**

**HELP PROTECT THE PEOPLE YOU LOVE.**

**HELP PROTECT THE PEOPLE AROUND YOU.**

References: 1. Centers for Disease Control and Prevention (CDC). Recommended child and adolescent immunization schedule for ages 18 years or younger, United States, 2024. <https://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-child-combined-schedule.pdf>. Accessed June 12, 2024. 2. CDC. Information for parents: 2024 recommended immunizations for children 7-18 years old. <https://www.cdc.gov/vaccines/schedules/downloads/teen/parent-versionschedule-7-18yrs.pdf>. Last updated January 2024. Accessed June 12, 2024. 3. CDC. Human papillomavirus (HPV). HPV Infection. <https://www.cdc.gov/hpv/parents/about-hpv.html>. Accessed June 12, 2024. 4. CDC. Sexually Transmitted Infections (STIs). About Genital HPV Infection. <https://www.cdc.gov/sti/about/about-genital-hpv-infection.html>. Accessed June 12, 2024. 5. CDC. Meningococcal Disease. About Meningococcal Disease. <https://www.cdc.gov/meningococcal/about/index.html>. Accessed June 12, 2024. 6. CDC. Meningococcal Disease. Meningococcal Disease Symptoms and Complications. <https://www.cdc.gov/meningococcal/symptoms/index.html>. Accessed June 12, 2024. 7. CDC. Whooping Cough (Pertussis). About Whooping Cough. <https://www.cdc.gov/pertussis/about/index.html>. Accessed June 12, 2024. 8. CDC. Whooping Cough (Pertussis). Symptoms of Whooping Cough. <https://www.cdc.gov/pertussis/signs-symptoms/index.html>. Accessed June 12, 2024. 9. CDC. Vaccine Information Statements (VISs). Tdap (Tetanus, Diphtheria, Pertussis) VIS. <https://www.cdc.gov/vaccines/hcp/vis/vis-statements/tdap.html>. Accessed June 12, 2024. 10. CDC. Vaccine Information Statements (VISs). Diphtheria, Tetanus, and Whooping Cough Vaccination. <https://www.cdc.gov/vaccines/vpd/tdap-tdap-td/public/index.html>. Accessed June 12, 2024. 11. CDC. National, regional, state, and selected local area vaccination coverage among adolescents aged 13-17 years—United States, 2018. *MMWR*. 2019;68(33):718-723.

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Vaccination goes with education

**VAXSERVE**

working for prevention

**WHY WAIT VACCINATE**

Before the new school year begins, get the CDC\*-recommended vaccinations against<sup>1</sup>:

\*CDC = Centers for Disease Control and Prevention.





# OTHERS

01



## PATIENT FACING MATERIALS Meninge Flashcard

Target Audience: Parents of children and teenagers, particularly those preparing for school or travel.

Objective: This piece provides key information on the disease and underscores vaccination as a vital step to help protect **children's** health and prevent complications.

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MAT-US-2401109-v1.0-04/2024

### What is meningococcal disease?<sup>1</sup>

Meningococcal disease refers to any illness caused by bacteria called *Neisseria meningitidis*. Six serogroups of *Neisseria meningitidis* (A, B, C, W, X, and Y) are responsible for most cases of the disease globally, with types B, C, and Y primarily affecting the United States

### Here's how to recognize the signs<sup>2</sup>

Meningococcal meningitis occurs when the *Neisseria meningitidis* bacteria infect and inflame the lining of the brain and spinal cord

### How does meningococcal meningitis spread?<sup>3</sup>

- 1 in 10 people carry *Neisseria meningitidis* bacteria without showing symptoms
- Meningococcal bacteria spreads through close contact via respiratory secretions like saliva, typically through coughing or kissing
- Unlike the common cold or flu, it's less contagious and isn't transmitted through casual contact

### Know the risk<sup>4</sup>

Meningococcal disease can affect anyone, but certain individuals face higher risks due to various factors mentioned below:

- **Ages:**
  - Children younger than 1 year old
  - Adolescents and young adults
  - Adults 65 years and older
- **Medical conditions like:**
  - HIV
  - Persistent complement component deficiencies
  - Functional and anatomic asplenia
- **Medications:** People who receive complement inhibitors
- **Places and settings:** Conditions where people work, live, and travel can also increase their risk for meningococcal disease
  - Microbiologists handling meningococcal disease bacteria
  - College students living in dormitories
  - Military recruits in crowded barracks
  - Travellers to sub-Saharan Africa's meningitis belt

REFERENCES:  
01. <https://www.cdc.gov/meningococcal/about/causes-transmission.html>  
02. <https://www.cdc.gov/meningococcal/about/symptoms.html>  
03. <https://www.cdc.gov/meningococcal/about/causes-transmission.html>

### Understanding the disease<sup>5</sup>

**Diagnosis:** Doctors typically collect blood or cerebrospinal fluid samples for laboratory testing



**Treatment:** Meningococcal disease is promptly treated with antibiotics to lower mortality risk. Treatment must start as soon as possible



Additional treatments can include breathing support, medications to treat low blood pressure, and depending on severity, surgery or wound care

**Complications:** Despite antibiotic treatment, 10-15% of meningococcal disease cases result in death, and up to 20% of survivors experience lasting disabilities, including limb loss, deafness, nervous system issues, and brain damage



### Who needs meningococcal vaccines?<sup>6</sup>

The CDC urges routine use of MenACWY vaccination for every preteen and teen

- **Preteen between 11 and 12:** MenACWY vaccine
- **Teens 16-18:** MenACWY Booster dose

The CDC recommends MenB based on a discussion with your healthcare professional

Protect your child. Ask your health care professional about meningococcal vaccination



04. <https://www.cdc.gov/meningococcal/about/risk-factors.html>  
05. <https://www.cdc.gov/meningococcal/about/diagnosis-treatment.html>  
06. <https://www.cdc.gov/vaccines/vpd/mening/public/index.html#shoutd>

# OTHERS

01



## PATIENT FACING MATERIALS Pertussis Flashcard

Target Audience: Adults, parents, caregivers, and those in close contact with infants or vulnerable individuals.

Objective: This piece highlights pertussis risks and the importance of vaccination, urging individuals to consult healthcare providers for protection.

Click on the image to download the asset.



### Be Wise, Immunize: Whooping cough protection



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MAT-US-2401108-v1.0-04/2024

#### What is whooping cough (pertussis)?<sup>1,2</sup>

It is a highly contagious respiratory illness caused by the bacterium *Bordetella pertussis*. It affects people of all ages, and is very dangerous for babies.

#### Understanding the spread of pertussis<sup>2</sup>

- Pertussis spreads through the air when an infected person coughs or sneezes
- The infected person remains contagious for at least two weeks after coughing starts
- People with mild or no symptoms can also unintentionally spread pertussis bacteria
- Close contacts like parents, siblings, and caregivers might not know they are infected with pertussis and unknowingly spread pertussis to babies

#### Let's look at the symptoms<sup>3</sup>

The onset of symptoms usually starts 5 to 10 days after exposure but takes 3 weeks to develop



**Babies and young children** with pertussis can experience dangerous breathing pauses (apnea) and turn blue or purple (cyanosis) and requires immediate medical attention

**Pertussis-vaccinated teens and adults** generally have common cold-like infections without the whoop, while unvaccinated individuals are more likely to experience prolonged coughing fits

#### Strategies to prevent pertussis<sup>4</sup>

- CDC recommends staying up to date with your pertussis vaccination
- CDC recommends getting a whooping cough vaccine during each pregnancy<sup>5</sup>
- For people exposed to whooping cough, CDC recommends preventive antibiotics only if they: live with the person who has been diagnosed with whooping cough; are at risk for serious disease (e.g., babies, people with certain medical conditions) or will have close contact with someone who is at increased risk for serious disease (e.g., women in their third trimester of pregnancy, people who work with or care for high risk individuals).
- By covering coughs/sneezes with tissues or upper sleeve or elbow and washing hands thoroughly with soap and water and using an alcohol-based hand sanitizer if soap and water are not available

#### Know the risk<sup>6</sup>

Pertussis can cause complications in all age groups. Babies with pertussis can face severe and deadly complications. Babies and children are more likely to get serious complications if they have not had all recommended pertussis vaccines. One-third of babies younger than one year old who get whooping cough require hospitalization, about:

- 2 in 3 (68%) get apnea (life-threatening breathing pauses)
- 1 in 5 (22%) get pneumonia (lung infection)
- 1 in 50 (2%) get convulsions (violent, uncontrolled shaking)
- 1 in 150 (0.6%) get encephalopathy (brain disease)
- 1 in 100 (1%) will die

**Teens and adults** with pertussis are also at risk of pneumonia and severe coughing, which can lead to:

- Pass out
- Rib Fracture (break)
- Loss of weight
- Death (1%)
- Loss of bladder control

Complications are usually less serious in this older age group, especially in those who have been vaccinated against whooping cough. However, if complications are serious, some people may need care in the hospital.

#### Who needs pertussis vaccines?<sup>7</sup>

- The CDC recommends pertussis vaccination for everyone, including babies, children, preteens, pregnant women, and adults who have never received a Tdap shot
- Two types of vaccines are used to protect against pertussis, which also safeguard against other diseases:
  1. Diphtheria, tetanus, and pertussis (DTaP) vaccines for babies and children younger than 7 years old
  2. Tetanus, diphtheria, and pertussis (Tdap) vaccines for adolescents and adults above 7 years old

**DTaP for babies and young children**  
The CDC recommends that children receive 5 DTaP doses at 2, 4, and 6 months. Babies - 3 shots  
Young children - 2 booster shots<sup>8</sup>

**Tdap for pregnant women**  
1 dose of Tdap at 27-36 gestational weeks in each pregnancy<sup>9</sup>

**Tdap for preteens through 11 to 12 years**  
1 dose Tdap (adolescent booster)<sup>10</sup>

**Tdap for adults**  
For adults without previous Tdap immunization, a Tdap dose is recommended, along with booster shots of either Tdap or Td every 10 years (or earlier for severe injuries)<sup>11</sup>

Protect yourself and loved ones from Pertussis. Talk to your healthcare professional about vaccination

Reference:  
1. <https://www.cdc.gov/pertussis/index.html>  
2. <https://www.cdc.gov/pertussis/about/cause-transmission.html>  
3. <https://www.cdc.gov/pertussis/about/signs-symptoms.html>  
4. <https://www.cdc.gov/pertussis/about/prevention/index.html>  
5. <https://www.cdc.gov/pertussis/pregnant/mom/get-vaccinated.html>  
6. <https://www.cdc.gov/pertussis/about/complications.html>  
7. <https://www.cdc.gov/vaccines/imz/pertussis/index.html>  
8. <https://www.cdc.gov/vaccines/imz/tdap/tdap-tdp-pdt/pdt/index.html>  
9. <https://www.cdc.gov/vaccines/imz/tdap/tdap-tdp-tdp-pdt/pdt/index.html#tdap>  
10. <https://www.cdc.gov/vaccines/imz/tdap/tdap-tdp-tdp-pdt/pdt/index.html#adolescent>

# OTHERS

01

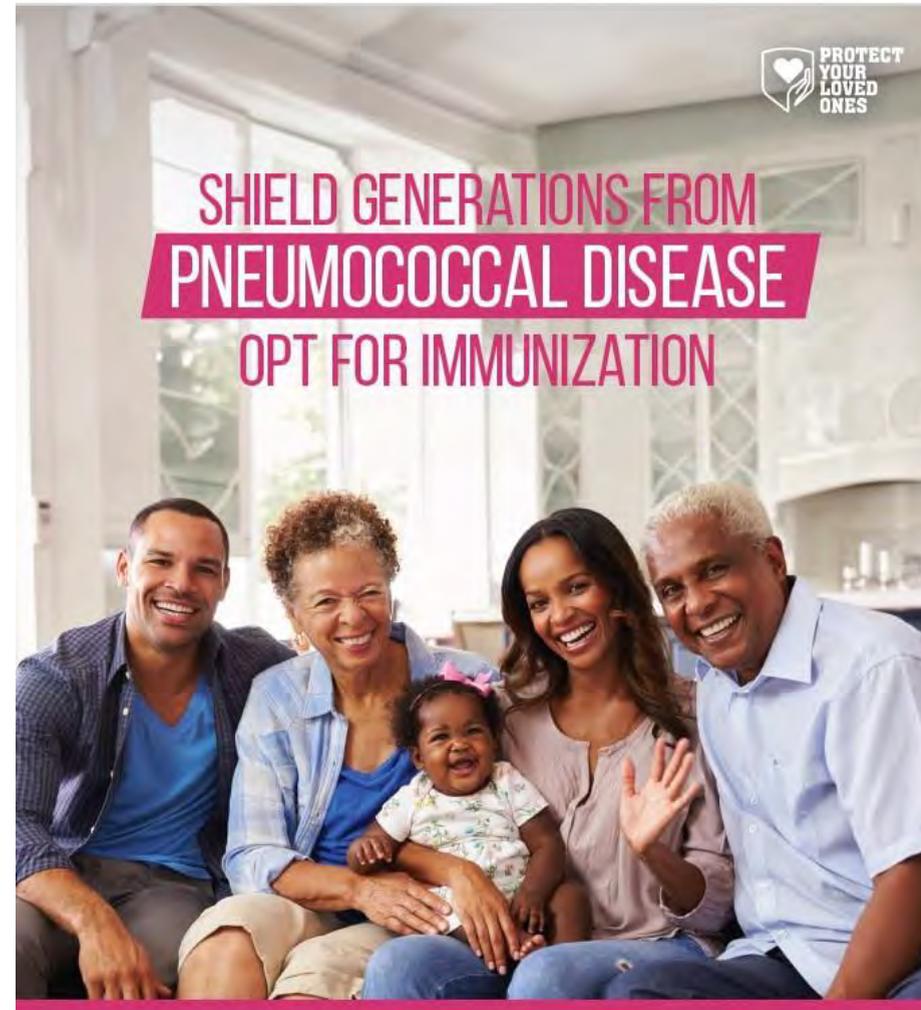


## PATIENT FACING MATERIALS Pneumo Flashcard

Target Audience: Adults with young children, elderly, or immunocompromised family members.

Objective: This **flashcard** raises awareness of pneumococcal disease and encourages vaccination to help protect both individuals and those around them.

Click on the image to download the asset.



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### What is pneumonia?<sup>1,2</sup>

- Pneumonia is a lung infection that can cause illness ranging from mild to severe in individuals of all ages<sup>1</sup>
- The majority of pneumonia cases in the United States occur in adults<sup>2</sup>
- Vaccinations and proper treatment, including antibiotics and antivirals, have the potential to prevent numerous deaths<sup>2</sup>



### Understand the causes<sup>3</sup>



Pneumonia can be caused by viruses, bacteria, or fungi



*Streptococcus pneumoniae* (pneumococcus) is a common bacteria responsible for pneumonia

### Vaccination<sup>4</sup>

There are two kinds of pneumococcal vaccines in the United States that protect against pneumonia caused by pneumococcus:

- Pneumococcal conjugate vaccines (PCV15 or PCV20)
- Pneumococcal polysaccharide vaccine (PPSV23)



### The CDC recommends pneumococcal vaccination for

- All children under 5 years
- Individuals aged between 5 to 64 at higher risk for pneumococcal disease
- Adults aged 65 and older

#### References:

1. <https://www.cdc.gov/pneumonia/index.html>
2. <https://www.cdc.gov/pneumonia/prevention.html>
3. <https://www.cdc.gov/pneumonia/causes.html>

4. <https://www.cdc.gov/pneumococcal/about/prevention.html>
5. <https://www.cdc.gov/pneumococcal/about/risk-transmission.html>

### Who is vulnerable?<sup>5</sup>



Children under 5



Adults aged 65 and older



Adults with weakened immune system



People with additional risk factors (for example: cigarette smoking, alcoholism, cochlear implant)

### Healthy habits to help prevent pneumonia<sup>2</sup>



Avoid people who are sick and if you are sick, stay away from others



Washing hands regularly and disinfecting frequently touched surfaces



Quitting smoking and limiting contact with cigarette smoke



Coughing or sneezing into a tissue or into your elbow or sleeve



Taking good care of medical conditions (like asthma, diabetes, or heart disease)



**Prioritize prevention against pneumonia with pneumococcal vaccine**

# OTHERS

01



## PATIENT FACING MATERIALS Shingles Flashcard

Target Audience: Adults aged 50 and older.

Objective: The piece aims to raise awareness about shingles and encourage individuals to consult their healthcare provider about vaccination.

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### What is Shingles?!

Shingles is caused by varicella-zoster virus (VZV), the same virus that causes chickenpox.

- Once you've recovered from chickenpox, the virus remains inactive in the body, but it can reactivate years later, causing shingles.<sup>1</sup>
- About 1 in 3 people in the U.S. will have shingles in their lifetime.<sup>1</sup>
- As you age, the risk and complications rise, with 10-18% facing lasting nerve pain.<sup>1</sup>

### Understanding the risk of spreading varicella-zoster virus

- People with shingles can transmit the varicella-zoster virus to those who have never had chickenpox or never received the chickenpox vaccine.<sup>1</sup>
- VZV can be spread by direct contact with fluid from shingles rash blisters or breathing in virus particles.<sup>1</sup>
- People with chickenpox are more likely to spread VZV than those with shingles.<sup>1</sup>

### Recognizing early signs and common symptoms!

- Early signs of shingles include pain, itching or tingling before the rash appears, often accompanied by fever.
- The rash typically appears as a stripe on one side of the body or face, with rare cases resembling a widespread chickenpox rash, usually in those with weakened immune systems.
- Additional symptoms may include headache, chills, and upset stomach.

### Breaking the chain: strategies to prevent Shingles spread!

- Cover the rash.
- Don't scratch or touch the rash.
- Wash hands often for at least 20 seconds.
- Avoid contact with people until the rash scabs over, including:
  - Pregnant women who never had chickenpox or the chickenpox vaccine.
  - Premature or low birth weight infants.
  - People who are immunocompromised (have a weakened immune system).

### People at high-risk for having Shingles!

This includes people who:

- Have a medical condition that weakens their immune system, such as leukemia, lymphoma, and HIV.
- Take medications suppressing the immune system, such as steroids and drugs given for organ transplant.<sup>1</sup>

### Navigating complications of Shingles

- The most common complication of shingles is long-term nerve pain, known as postherpetic neuralgia (PHN), which persists after the rash resolves.
- PHN occurs where the shingles rash was and can last for months or years.<sup>1</sup>
- PHN is extremely painful and can interfere with daily life.<sup>1</sup>
- About 10-18% of shingles patients experience PHN, and the risk increases with age.<sup>1</sup>

### Other complications of Shingles

- Shingles has many serious outcomes including **serious eye complications, bacterial infection of the rash, pneumonia, hearing problems, brain inflammation, and rarely death.**
- Those with **weakened immune systems face higher risks of complications,** including a more severe and prolonged rash.

### Finding Relief & Recovery!

- Shingles vaccination is the only way to protect against shingles and PHN.
- Treat with antiviral as soon as possible after the rash appears.

### Shingles Vaccination: a must-know for eligible individuals

- CDC recommends adults 50 years and older get two doses of the shingles vaccine, Shingrix, 2 to 6 months apart, to prevent shingles and disease complications.<sup>1</sup>
- Also advised for **adults 19 and older with weakened immune systems.**
- **Over 90% effective in healthy adults 50 and older.**

Don't let Shingles disrupt your life!  
Act now.  
Talk to your healthcare professional

Reference: 1. Centers for Disease Control and Prevention. Accessed November 10, 2023. <https://www.cdc.gov/shingles/index.html>  
<https://www.cdc.gov/shingles/about/complications.html> <https://www.cdc.gov/shingles/about/transmission.html>  
<https://www.cdc.gov/vaccines/vpd/shingles/public/shingrix/index.html>

# 02

## HEALTHCARE PROFESSIONAL FACING MATERIALS

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# FLU

02



## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Flu: Working for Prevention Flashcards

Target Audience: HCPs in primary care, pediatrics, geriatrics, and chronic disease management, including vaccinators.

Objective: To empower HCPs to advocate for annual flu vaccination in all eligible individuals (≥6 months), while prioritizing high-risk groups such as young children (≤5 years), older adults (≥65 years), and patients with chronic conditions.

Click on the image to download the asset.

### Front Cover Options

Flu: Working for Prevention – Flu Fighter (Infant)



Flu: Working for Prevention – Flu Fighter (Senior)



Flu: Working for Prevention – Flu Fighter (Adult and Child)



### Back Side of Flashcard

#### Vaccination is the key to prevention:

Yearly flu vaccination has been shown to reduce flu-related illnesses and the risk of serious flu complications. The CDC advises annual flu vaccination for all eligible individuals aged 6 months and older.<sup>1</sup>

#### Prioritize Vaccination for High-Risk Patients:<sup>1</sup>

- Identify high-risk patients susceptible to complications from the flu, including people who:
  - are **5 years** of age or younger.
  - are **aged 65** and above.
  - have certain chronic conditions (like asthma, diabetes, or heart disease)

If you do not offer vaccination at your facility, provide an influenza vaccine referral. Follow up with your patient to ensure they get vaccinated.

Between **70% and 85%** of seasonal flu-related deaths occurred in those aged 65 and older, and **50% to 70%** of seasonal flu hospitalizations have occurred in this age group.<sup>1</sup>

#### More Ways to Help Protect Patients:

- Provide patients additional educational resources that underscore risks of flu illness and the benefits of flu vaccination.
- Collaborate with local health departments and nonprofit advocacy organizations to promote flu vaccines for at-risk individuals and the community as a whole.

#### Common Symptoms of the Flu:<sup>1</sup>

 Fever or Feeling Feverish/Chills	 Sore Throat	 Muscle or Body Aches
 Cough	 Runny or Stuffy Nose	 Headaches
 Fatigue (Tiredness)	 Vomiting and Diarrhea (more common in children than adults)	

#### How to Address Common Patient Misconceptions<sup>1</sup>

- Share why vaccination may be right for your patient given their age, health status, lifestyle, occupation, or other risk factors.
- Emphasize to patients that the flu is a highly prevalent infectious disease that spreads easily.
- Remind your eligible patients that vaccination can help protect them and their loved ones against serious influenza illness and complications.
- Acknowledge some people who get a flu vaccine still get sick, but flu vaccinations can make illness less severe. Side effects are generally mild, compared to flu symptoms.

<sup>1</sup>Centers for Disease Control and Prevention. Accessed November 10, 2023. <https://www.cdc.gov/flu/>, <https://www.cdc.gov/flu/symptoms/symptoms.html>

# FLU

02



HEALTHCARE PROFESSIONAL FACING MATERIALS

## LTC Flashcard

Target Audience: HCPs involved in the care of patients aged 65 and older.

Objective: This material aims to educate HCPs on **flu** risks in long-term care **benefits** of **flu** vaccine in reducing.

Click on the image to download the asset.

### UNDERSTANDING FLU BURDEN AND IMPROVING QUALITY MEASURES IN YOUR FACILITY



#### IMPACT OF FLU IN LONG-TERM CARE FACILITIES (LTCFs)

Over

# 60%

of nursing home residents can become infected during flu outbreaks<sup>1</sup>

Among residents who get influenza,<sup>1</sup>

~1 in 2 ●●●●●●●●●●  
develop pneumonia

~1 in 4 ●●●●●●●●●●  
are hospitalized

1 in 10 ●●●●●●●●●●  
die of influenza-related complications

#### FLU INFECTIONS CAN LEAD TO HOSPITALIZATIONS<sup>2</sup>

Influenza is:



A major driver of hospital admissions for nursing home residents<sup>2,3</sup>



A leading cause of infectious outbreaks in long-term care facilities<sup>2,3</sup>



One of the most costly vaccine-preventable illnesses among older adults<sup>4</sup>

LEARN ABOUT NEW CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS) CHANGES AND ASK VAXSERVE ABOUT FLU VACCINE OPTIONS THAT CAN HELP YOU LOWER COSTS.

### IMPROVING FLU PROTECTION AND ADDRESSING QUALITY MEASURES



#### CMS UPDATES AND YOUR FACILITY

##### HOW CMS REIMBURSEMENT AND QUALITY MEASURES ARE CHANGING<sup>5</sup>

In 2025, the CMS 2% per diem rate reduction for skilled nursing facilities (SNFs) begins.<sup>5</sup>  
• You can earn back up to 60% of that reduction through high-quality measure scores in multiple areas, including **potentially preventable 30-day post-discharge readmission (PPR)**

The PPR measure is an important SNF quality measure.<sup>6</sup>  
• **Starting in 2028, readmissions will be measured for the entire time frame a resident is in the facility, not just the 30-day post-discharge period**

IMPROVING YOUR FACILITY'S QUALITY SCORES—LIKE THE PPR MEASURE—COULD HELP YOU EARN BACK PART OF THE PER DIEM RATE REDUCTION.

ASK VAXSERVE ABOUT FLU VACCINE OPTIONS THAT COULD HELP YOU KEEP MORE OF YOUR RESIDENTS OUT OF THE HOSPITAL THIS FLU SEASON.

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## FLU

02



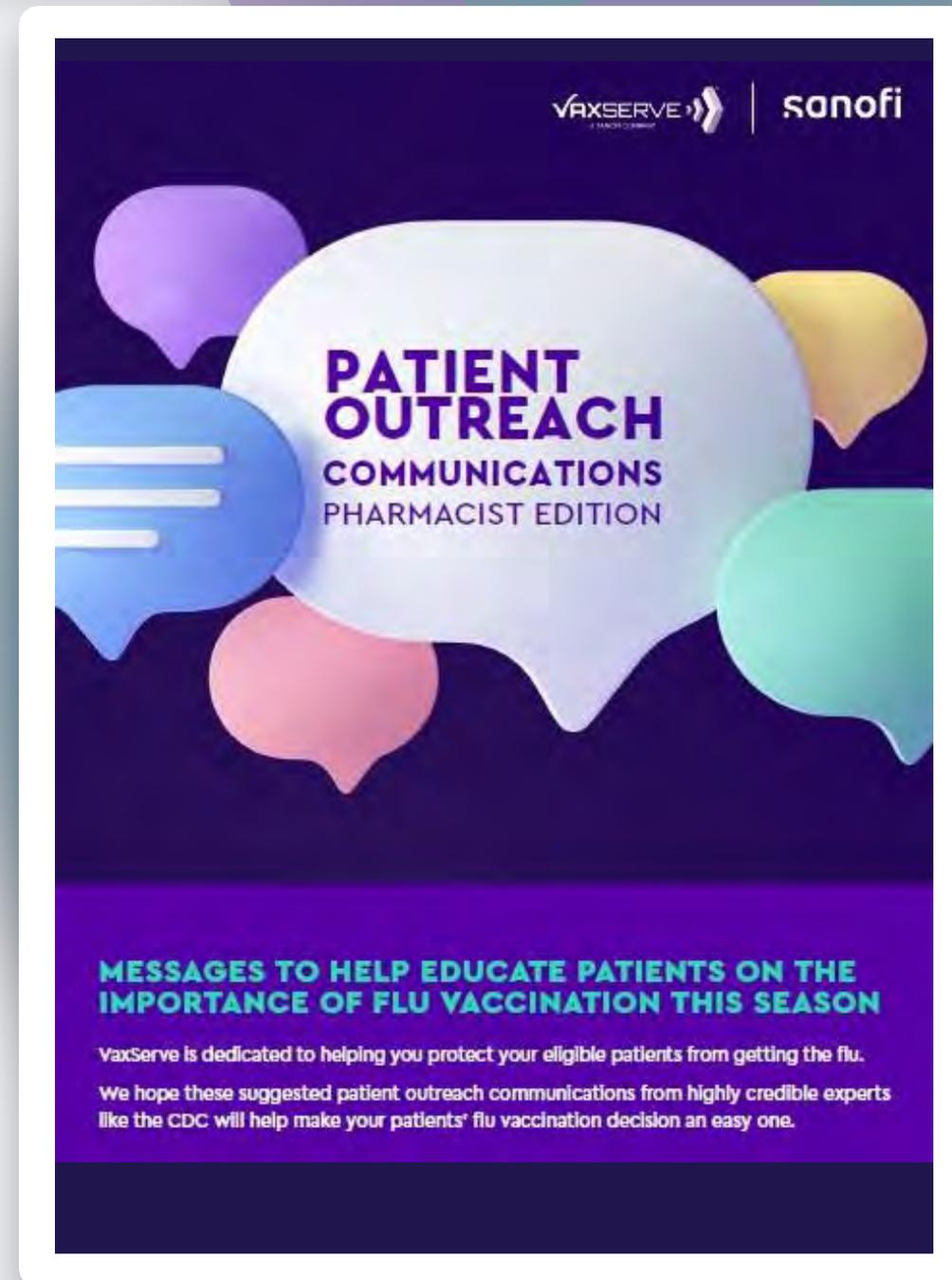
### HEALTHCARE PROFESSIONAL FACING MATERIALS

#### Pharmacist Unbranded Patient Flu Education Messaging

Target Audience: Pharmacists who administer **flu** vaccines.

Objective: This guide equips pharmacists with key information to **confidently** address common vaccine questions and patient concerns, ensuring they're prepared for immunization discussions this season.

[Click on the image to download the asset.](#)



# FLU

02



HEALTHCARE PROFESSIONAL FACING MATERIALS

## Flu Technology Flashcard

Target Audience: Healthcare providers seeking to understand **flu** vaccine types and manufacturing methods.

Objective: The objective of this material is to inform HCPs about the differences between egg-based, cell-based, and recombinant **flu** vaccines to support informed vaccine selection.

Click on the image to download the asset.

For US healthcare professionals only

### NOT ALL FLU VACCINES ARE CREATED ALIKE

Various flu vaccine technologies follow the same general steps, but there are differences.

MANUFACTURING PROCESS	EGG-BASED & CELL-BASED FLU VACCINES	RECOMBINANT FLU VACCINES
<b>STRAIN IDENTIFICATION</b> <ul style="list-style-type: none"><li>In the United States, the CDC and other collaborating centers of the WHO predict the influenza strains likely to be the most prevalent in the upcoming flu season<sup>2*</sup></li></ul>	<b>CANDIDATE VACCINE VIRUS</b> <ul style="list-style-type: none"><li>The CDC provides manufacturers with candidate vaccine virus (CVV) grown in chicken eggs or cultured in mammalian cells<sup>2</sup></li></ul>	<b>REPLICATE HA GENE</b> <ul style="list-style-type: none"><li>The gene for hemagglutinin (HA) is cloned from a reference virus published in the GISAID database<sup>1</sup></li></ul>
<b>REPLICATION</b> <ul style="list-style-type: none"><li>The selected strain(s) is/are replicated or created synthetically to provide sufficient quantities<sup>2</sup></li><li>Risk of mismatch with the selected strain(s) varies depending on the technology used<sup>1,3</sup></li></ul>	<b>INFECT EGG/CELL</b> <ul style="list-style-type: none"><li>Virus is inoculated into chicken eggs (egg-propagated production) or mammalian cells (cell-propagated production)<sup>2</sup></li></ul> <b>GROW</b> <ul style="list-style-type: none"><li>Eggs/cells are incubated to allow viral replication<sup>2</sup></li></ul>	<b>RECOMBINE</b> <ul style="list-style-type: none"><li>The HA gene is inserted into a baculovirus vector which then infects insect cells, causing them to express the HA protein<sup>1,2</sup></li></ul> <b>TRANSLATE rHA ANTIGEN</b>
<b>HARVESTING &amp; PURIFICATION</b> <ul style="list-style-type: none"><li>Resultant antigens are harvested and purified to remove contaminants<sup>2</sup></li><li>With technologies that use live virus, the live virus must generally be inactivated<sup>2</sup></li></ul>	<b>INACTIVATE &amp; PURIFY</b> <ul style="list-style-type: none"><li>Virus is harvested, inactivated, and purified<sup>1,4</sup></li></ul> <b>INACTIVATED INFLUENZA VACCINE</b>	<b>HARVEST &amp; PURIFY</b> <ul style="list-style-type: none"><li>The HA is harvested and purified</li><li>Because there's no live virus, there's no need for virus inactivation<sup>1,2</sup></li></ul> <b>RECOMBINANT INFLUENZA VACCINE</b>
<b>TOTAL PRODUCTION TIME</b>	6-8 months <sup>5</sup>	2-3 months <sup>1</sup>

Why does type of flu vaccine technology matter? →

\*CVVs may be provided by either the CDC or another laboratory partner in the WHO Global Influenza Surveillance and Response System.<sup>3</sup>  
CDC=Centers for Disease Control and Prevention; GISAID=Global Initiative on Sharing All Influenza Data; WHO=World Health Organization.

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# FLU

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HEALTHCARE PROFESSIONAL FACING MATERIALS

## Importance of Flu Vaccination in Workplace For Employers

Target Audience: Employers, HR professionals, and workplace wellness coordinators responsible for employee health.

Objective: This material educates employers on the value of workplace **flu** vaccination.

Click on the image to download the asset.

# THE IMPORTANCE OF FLU VACCINATIONS FOR YOUR WORKPLACE

**EVEN AMONG HEALTHY ADULTS, FLU IS A HIGHLY CONTAGIOUS ILLNESS and a major cause of sickness, work absenteeism, and economic disruption.<sup>1</sup>**



**HEALTHY ADULTS AGED 18-64 CAUSE ~58% of the total economic burden of flu.<sup>2</sup>**



**During the 2022-2023 flu season, ONLY ~40% OF PEOPLE AGED 18-64 GOT A FLU SHOT.<sup>3</sup>**



**ANNUALLY, FLU CAUSES 17 MILLION WORKDAYS MISSED— THAT'S 3.5 DAYS\* PER EMPLOYEE.<sup>4,5</sup>**



\*Of their 5 work days in a given week.

**A FLU VACCINE IS THE FIRST AND BEST WAY TO HELP PROTECT EMPLOYEES FROM FLU AND REDUCE THE SPREAD IN YOUR WORKPLACE.<sup>6</sup>**

**A flu vaccine can SAVE YOU ~\$13.66 PER EMPLOYEE VACCINATED!<sup>1</sup>**

Net costs (savings) = cost of vaccination - costs averted due to vaccination



<sup>1</sup>The model included direct (eg, vaccine, medical care) and indirect costs (eg, absenteeism to be vaccinated and due to side effects) and was most sensitive to their influenza illness rate, the work absenteeism rate due to influenza, and hourly wages.

**The Centers for Disease Control and Prevention (CDC) estimates that a vaccinated workforce may experience<sup>7</sup>:**

- 13%-44%** fewer doctor visits
- 18%-45%** fewer lost workdays
- 18%-28%** fewer days with reduced productivity

**LET US PUT OUR EXPERTISE TO WORK! CONTACT YOUR ACCOUNT MANAGER TODAY.**



REFERENCES: 1. NICHOL WL. COST-BENEFIT ANALYSIS OF A STRATEGY TO VACCINATE HEALTHY WORKING ADULTS AGAINST INFLUENZA. ARCH INTERN MED. 2001;161:759-759. 2. FUTRI WONS, MUSCATELLO DJ, STOCKWELL MS, NEWALL AT. ECONOMIC BURDEN OF SEASONAL INFLUENZA IN THE UNITED STATES. VACCINE. 2018; 36(27):3940-3946. 3. CDC. INFLUENZA COVERAGE FOR PERSONS 6 MONTHS AND OLDER. CENTERS FOR DISEASE CONTROL AND PREVENTION. ACCESSED NOVEMBER 29, 2023. HTTPS://WWW.CDC.GOV/WIPFLU/VAX/VIEW/INTERACTIVE-GENERAL-POPULATION.HTM#PRINT. 4. CDC. FLU AND PNEUMONIA. CENTERS FOR DISEASE CONTROL AND PREVENTION. ACCESSED OCTOBER 24, 2023. HTTPS://WWW.CDC.GOV/WORKPLACE/HEALTHPROTECTION/HEALTHSTRATEGIES/FLU/PNEUMONIA/IND.HTM#L. 5. VAN WORMER JJ, KING JP, GALEYSKI A, MCGEAN HO, BELONGIA EA. INFLUENZA AND WORKPLACE PRODUCTIVITY LOSS IN WORKING ADULTS. J OCCUP ENVIRON MED. 2017;59(11):1135-1139. 6. CDC. FLU VACCINE SAFETY. CENTERS FOR DISEASE CONTROL AND PREVENTION. ACCESSED OCTOBER 24, 2023. HTTPS://WWW.CDC.GOV/FLU/PREVENT/GENERAL.HTM#S\_CDC-082022. 7. CDC. PREVENTION AND CONTROL OF INFLUENZA: RECOMMENDATIONS OF THE ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES (ACIP), 2007. MMWR. 2007;56(NR16):B-6.

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# FLU

02



## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Importance of Flu Vaccination in Workplace For Employees

Target Audience: Employers, especially those involved in workplace health and wellness programs.

Objective: This material is designed for employees to raise awareness about **flu** risks in the workplace and the importance of vaccination to help protect oneself and others.

[Click on the image to download the asset.](#)

**FLU COULD BE SPREADING IN YOUR WORKPLACE. ARE YOU PREPARED?**

**GETTING A FLU SHOT NOT ONLY HELPS PROTECT YOU AGAINST FLU, BUT IT ALSO HELPS PROTECT THOSE AROUND YOU.**

The CDC estimated that during the 2019-2020 flu season, there was an average of 390,000 hospitalizations due to flu.

During the 2019-2020 flu season, ~1 IN 3 FLU-RELATED DEATHS OCCURRED AMONG ADULTS 18-64.

~20.2% OF PEOPLE AGED 18-49 AND ~15.2% AGED 50-64 WHO HAD FLU WERE HOSPITALIZED IN THE 2021-2022 FLU SEASON.

PEOPLE WITH FLU MISS AN AVERAGE OF 3 WORK DAYS. Don't waste paid time off sick with flu!

FLU VACCINES CAN REDUCE FLU-RELATED MEDICAL VISITS BY 40-60%.\*

During the 2022-2023 flu season, vaccinated adults were:

- 44% less likely to visit the ER or urgent care for flu
- 39% less likely to be hospitalized for flu or its complications

\*During seasons where flu vaccine viruses were similar to circulating flu viruses.

REDUCE THE AMOUNT OF TIME AND MONEY YOU SPEND ON BEING SICK THIS YEAR WITH A FLU SHOT.

FLU VACCINES ARE OFTEN AVAILABLE AT LITTLE OR NO COST.

**FAQs**

**DO YOU STILL NEED A FLU SHOT EVERY YEAR IF YOU'RE HEALTHY?**

Flu vaccines are updated every year with FDA-recommended strains to keep up with rapidly adapting flu viruses. A flu shot also helps prevent the spread of flu to others.

**CAN YOU GET FLU FROM A FLU SHOT?**

You cannot get flu from a flu shot. Flu shots are either made with an inactive flu virus or developed using proteins from a flu virus that cannot cause infection.

**STAY HEALTHY THIS FLU SEASON WITH A FLU VACCINE.**

# FLU

02



## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Occupational Nurse Messaging Handout

Target Audience: Occupational nurses administering vaccines in the workplace or clinical settings.

Objective: This handout is designed to empower nurses with strategies to address vaccine hesitancy, dispel myths, and support increased vaccine uptake during immunization season.

Click on the image to download the asset.



### MAKING CONFIDENT VACCINE RECOMMENDATIONS: OCCUPATIONAL HEALTH NURSE TALKING POINTS

A strong endorsement by a healthcare professional provides a compelling reason for employees to adopt vaccine recommendations. Even initially reluctant adults are more likely to receive an influenza vaccination when the healthcare professional's opinion of the vaccine is positive.<sup>1</sup>

#### BELOW ARE SUGGESTIONS TO HAVE IMPACTFUL CONVERSATIONS ABOUT VACCINATION WITH EMPLOYEES

**STEP 1**

**Ask Every Eligible Employee**

- ▶ Ensure that healthcare staff are asking every eligible employee if they are up to date with their vaccines.
- ▶ Share an important benefit of vaccination right away.

*“Have you had your flu vaccine yet this year? Per the CDC: An annual seasonal flu vaccine is the best way to help reduce the risk of getting flu and any of its potentially serious complications.”<sup>1,2</sup>*

**STEP 2**

**Answer Questions with Facts**

- ▶ Be ready to address common myths and questions about vaccination, such as employees saying, “I heard the flu vaccine gives you the flu,” or asking, “Is it safe to get multiple vaccines at one visit?”
- ▶ Provide information about receiving multiple vaccines together to stay up to date on all necessary vaccines.

*“Per the CDC: Flu vaccines cannot cause flu illness. Flu vaccines given with a needle (i.e., flu shots) are made with either inactivated (killed) viruses, or with only a single protein from an influenza virus. The nasal spray vaccine contains live viruses that are attenuated (weakened) so that they will not cause illness.”<sup>3</sup>*

*“Coadministration or simultaneous administration of vaccines refers to giving or getting more than one vaccine during a visit.”<sup>4</sup>*

**STEP 3**

**Provide Resources**

- ▶ It is required to provide a VIS (Vaccine Information Statement) to employees being vaccinated. Review questions and concerns thoroughly before vaccination.<sup>5</sup>
- ▶ If employees are hesitant or unable to get vaccinated at that moment, send them home with the VIS and/or other patient-friendly resources. Provide contact information for them to ask questions. Offer to schedule an appointment for the employee that fits their schedule.

*“We offer a variety of ways to get vaccinated within our company. We will work to ensure you get immunized when it's convenient for you.”*

**MAKE CONFIDENT RECOMMENDATIONS TO PROTECT EMPLOYEES TODAY!**  
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**References:**

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- Centers for Disease Control and Prevention. Key Facts About Seasonal Flu Vaccine. Available at: <https://www.cdc.gov/flu/seasonal/keyfacts.html>. Accessed October 29, 2024.
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# FLU

02



## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Pharmacy Staff Messaging Handout

Target Audience: Pharmacists and technicians responsible for vaccine administration and patient outreach.

Objective: This handout equips pharmacy staff with the knowledge to address common vaccine questions, support informed recommendations, and enhance patient communication during immunization season.

Click on the image to download the asset.

**MAKING CONFIDENT VACCINE RECOMMENDATIONS PHARMACIST AND TECHNICIAN TALKING POINTS**

A strong endorsement by a pharmacist provides a compelling reason for patients to adopt vaccine recommendations. Even initially reluctant adults are more likely to receive an influenza vaccination when the health care professional's opinion of the vaccine is positive.<sup>1</sup>

**BELOW ARE SUGGESTIONS TO HAVE AN IMPACTFUL CONVERSATION ABOUT VACCINATION WITH YOUR PATIENTS!**

**STEP 1: Ask Every Eligible Patient**

- Ensure that pharmacy staff (technicians and pharmacists) are asking every eligible patient if they are up to date with their vaccines when picking up prescriptions.
- Share an important benefit of vaccination right away.

*"Have you had your flu vaccine yet this year? Per the CDC: An annual seasonal flu vaccine is the best way to help reduce the risk of getting flu and any of its potentially serious complications."<sup>2</sup>*

**STEP 2: Answer Questions with Facts**

- Be ready to address common myths and questions about vaccination, such as patients saying: "I heard the flu vaccine gives you the flu," or asking, "Is it safe to get multiple vaccines at one visit?"
- Provide information about receiving multiple vaccines together to get up to date on all necessary vaccines. This is called coadministration.

*"Per the CDC: No, flu vaccines cannot cause flu illness. Flu vaccines given with a needle (i.e., flu shots) are made with either inactivated (killed) viruses, or with only a single protein from the flu virus. The nasal spray vaccine contains live viruses that are attenuated (weakened) so that they will not cause illness."<sup>3</sup>*

*"Coadministration of vaccines refers to giving or getting more than one vaccine during a visit. This is common clinical practice. While there are some exceptions, most vaccines can be given at the same visit."<sup>4</sup>*

**STEP 3: Provide Resources**

- It is required to provide a VIS (Vaccine Information Statement) to patients being vaccinated or guardians of patients being vaccinated. Review the patient's questions and concerns thoroughly with them before vaccination.<sup>5</sup>
- If patients are hesitant, or unable to get vaccinated at that moment, send them home with VIS and/or other patient-friendly resources. Provide contact information for the pharmacist for the patient to ask questions. Offer to schedule an appointment for the patient that fits their schedule.

*"We offer a variety of ways to get vaccinated at our pharmacy. If a walk-in vaccine works for you, we can offer that, or we can schedule a specific time for you to come in!"<sup>5</sup>*

**MAKE CONFIDENT RECOMMENDATIONS TO PROTECT YOUR PATIENTS TODAY!**  
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References:  
1. CDC, Epidemiology and Prevention of Vaccine-Preventable Diseases, available at: <https://www.cdc.gov/vaccines/pubs/pinkbook/strat.html> (last accessed June 7, 2024)  
2. CDC, Key Facts About Seasonal Flu Vaccine, available at: <https://www.cdc.gov/flu/prevent/keyfacts.htm> (last accessed June 7, 2024)  
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# COVID

02



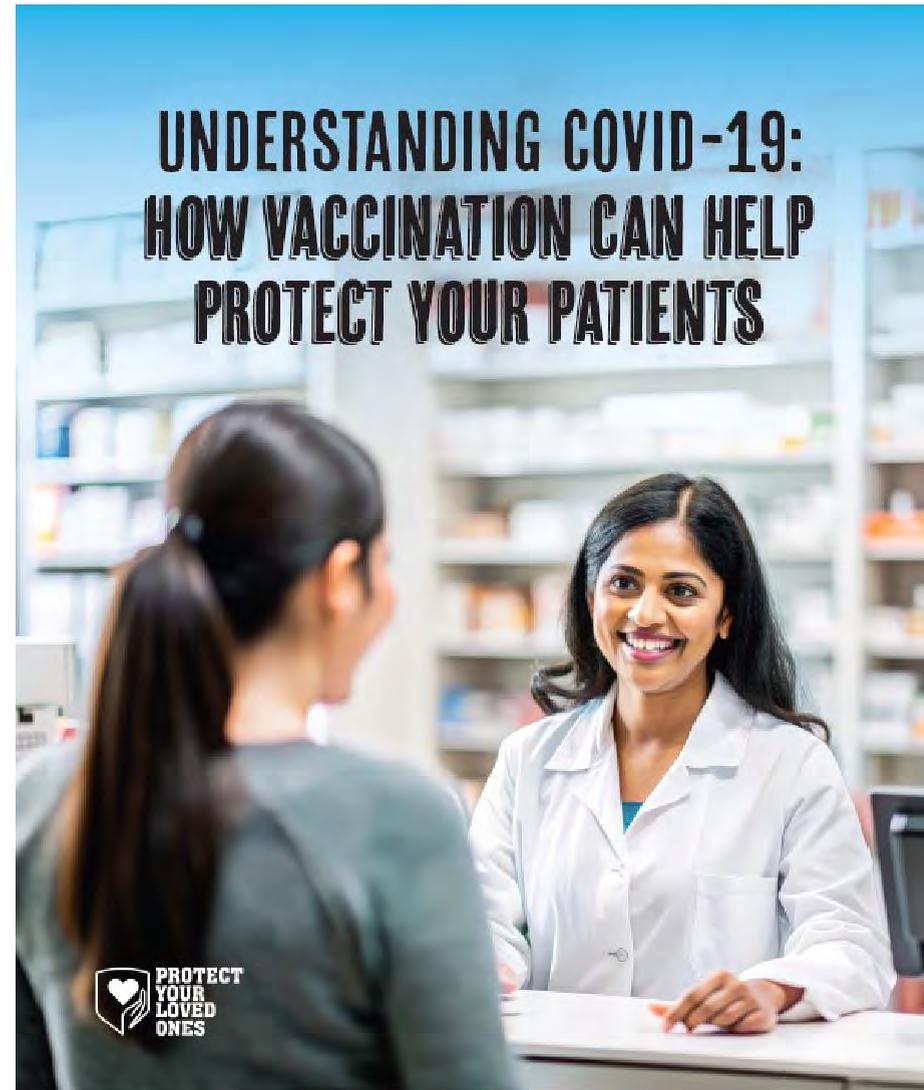
HEALTHCARE PROFESSIONAL FACING MATERIALS

## COVID Working for Prevention Flashcard

Target Audience: Healthcare providers advising and vaccinating patients against COVID-19.

Objective: The objective of this material is to educate providers on recommending updated COVID-19 vaccines to all eligible individuals, highlighting prevention, vaccine options, and risk factors to enhance patient protection.

Click on the image to download the asset.



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- As of June 1, 2024, nearly **1.2 million** people have died of COVID-19 in the U.S.<sup>1,2,3</sup>
- During the 2023-24 season, the overall rate of COVID-19-associated hospitalizations was **198.0** per 100,000 people.<sup>4</sup>

### Prevention:<sup>5</sup> Healthcare providers can advise patients to:

- Get an updated COVID-19 vaccine
- Seek COVID-19 treatment and preventive medication if eligible
- Practice good hygiene
- Improve air quality

Everyone aged 6 months and older is recommended by the ACIP to get a seasonal COVID-19 vaccine.<sup>6</sup>

People aged 65 years and older, vaccinated under the routine schedule, are recommended to receive 2 doses of any 2024–2025 COVID-19 vaccine separated by 6 months. Please see ACIP website for further details on immunization schedules.<sup>7</sup>

### Types of COVID-19 Vaccines and Their Technology<sup>8</sup>

There are two primary types of COVID-19 vaccines available: **mRNA vaccines** and **recombinant protein vaccines**.

- These vaccines prompt the body to recognize and help protect against the virus that causes COVID-19.
- They do not contain live virus and cannot cause COVID-19.
- These vaccines do not interact with DNA or alter genetic material.

### Risk Factors:<sup>5</sup>

Certain groups are more likely to develop Long COVID-19, including:

- Women
- Hispanic people
- Those with severe COVID-19 outcomes, such as hospitalization or ICU admission
- Individuals with underlying health conditions
- Did not receive COVID-19 vaccination

### Testing for COVID-19<sup>9</sup>

There are two types of viral tests:

- Antigen (Rapid) Tests:** These tests usually produce results in 15-30 minutes. Positive results are accurate and reliable, but they are less sensitive than NAAT tests.
- NAATs (e.g., PCR):** These tests are more likely to detect the virus than antigen tests. Results may be immediate or can take up to 3 days.

## Act Now to Help Your Patients Stay Ahead of COVID-19

DNA, deoxyribonucleic acid; mRNA, messenger ribonucleic acid; NAATs, Nucleic acid amplification tests; PCR, Polymerase Chain Reaction.

### References:

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# COVID

02



HEALTHCARE PROFESSIONAL FACING MATERIALS

## Flu/COVID Unbranded Flashcard

Target Audience: Healthcare providers advising and vaccinating patients against COVID-19 and flu.

Objective: The objective of this material is to encourage and support healthcare professionals in recommending and offering co-administration of COVID-19 and flu vaccines during a single appointment.

Click on the image to download the asset.

**ONE APPOINTMENT COULD HELP PROVIDE YOUR ELIGIBLE PATIENTS WITH PROTECTION FROM BOTH FLU AND COVID-19<sup>1</sup>**

**COVID-19 AND FLU HAVE A MAJOR IMPACT IN THE US**

<p>In 2023, <b>COVID-19</b> caused ~900,000 hospitalizations and ~75,000 deaths<sup>2</sup></p>	<p>In the 2022-2023 season, <b>Flu</b> caused ~360,000 hospitalizations and ~21,000 deaths<sup>3</sup></p>
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**DESPITE THE IMPACT OF THESE RESPIRATORY ILLNESSES, MANY PATIENTS ARE STILL HESITANT TO GET VACCINATED AGAINST THE FLU OR COVID-19 THIS SEASON<sup>4</sup>:**

<p><b>61%</b> say they do not plan to or are unsure if they will get an updated COVID-19 vaccine<sup>4</sup></p>	<p><b>45%</b> say they do not plan to or are unsure if they will get vaccinated against the flu<sup>4</sup></p>
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**RECOMMEND AND OFFER CO-ADMINISTRATION OF COVID-19 AND FLU VACCINES TO HELP PROTECT YOUR ELIGIBLE PATIENTS**

See reverse side for how co-administration can benefit both patients and healthcare professionals >

**ADVANTAGES OF CO-ADMINISTRATION FOR PATIENTS AND HEALTHCARE PROFESSIONALS**

**HOW DOES CO-ADMINISTRATION BENEFIT PATIENTS AND PROVIDERS?**

<p><b>Reduced costs for healthcare systems</b> Increasing vaccine uptake can lower the direct medical costs of respiratory illnesses, which totaled ~\$70B for COVID-19 hospitalizations from 2020 to 2023 and ~\$3.2B annually due to the flu (based on a 2015 study).<sup>5,7</sup></p>	<p><b>Reduced risk for at-risk patients</b> Patients who are older, pregnant, or have certain comorbidities are at <b>higher risk of severe illness and complications</b> from COVID-19 and flu. Just 1 appointment and 2 shots can help reduce eligible patients' risk of getting COVID-19 and flu.<sup>8</sup></p>
<p><b>Improved quality outcomes at the population level</b> Limiting the spread of flu and COVID-19 through better vaccine uptake can <b>reduce illnesses and hospitalizations across communities</b>, lowering the overall economic burden of these illnesses.<sup>9</sup></p>	<p><b>Increased healthcare team efficiency and convenience for patients</b> Co-administration <b>eliminates the need for multiple appointments and reminders</b>, offering convenience to patients while reducing the burden on your healthcare team.<sup>10</sup></p>

**YOU CAN HELP YOUR ELIGIBLE PATIENTS FEEL COMFORTABLE WITH CO-ADMINISTRATION BY:**

- Emphasizing that the CDC supports co-administration of flu and COVID-19 vaccines at the same appointment<sup>1</sup>
- Talking through side effect concerns and sharing that the CDC supports the safety of co-administration of flu and COVID-19 vaccines<sup>1</sup>

**HELP PROTECT YOUR PATIENTS FROM RESPIRATORY ILLNESSES THIS SEASON—PREORDER YOUR VACCINES AND OFFER TO CO-ADMINISTER WHEN ELIGIBLE AT ONE APPOINTMENT**

CDC—US Centers for Disease Control and Prevention.  
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2. CDC. The changing impact of COVID-19. February 23, 2024. Accessed November 11, 2024. <https://www.cdc.gov/ncid/dzdx/whats-new/changing-impact-covid-19.html>  
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# COVID

02



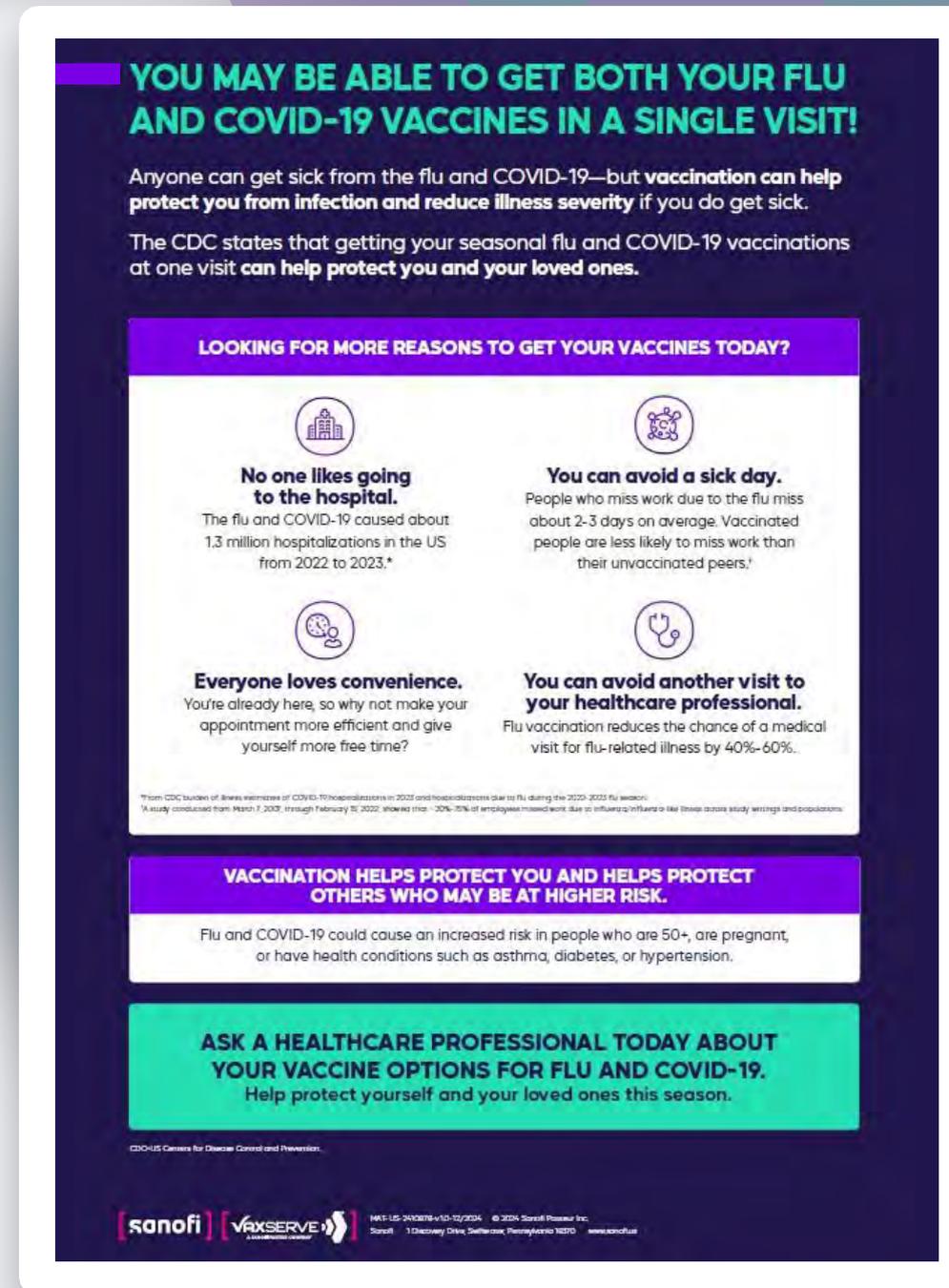
## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Flu/COVID Unbranded In Office Poster

Target Audience: Individuals who are eligible for **flu** and COVID-19 vaccinations.

Objective: The objective of this material is to encourage individuals to get both their **flu** and COVID-19 vaccines in a single visit.

[Click on the image to download the asset.](#)



# OTHERS

02



## HEALTHCARE PROFESSIONAL FACING MATERIALS

### Shingles Flashcard

Target Audience: HCPs involved in patient care and vaccination programs.

Objective: This marketing piece encourages HCPs to promote and administer the two-dose Shingles vaccine, empowering them to educate patients and prevent Shingles and its complications.

Click on the image to download the asset.



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#### Beyond the rash: clinical dimensions on Shingles

- Herpes zoster, resulting from **varicella-zoster virus reactivation**, causes painful skin rashes
- An estimated **1 million** cases occur annually in the United States.
- Approximately 10-18% of people with shingles will have postherpetic neuralgia (PHN), pain that persists where the rash was. PHN is more common in people over 40 years old.<sup>1</sup>

#### Clinical insights: navigating the features

- Herpes zoster typically manifests as a **painful rash in one or two adjacent dermatomes, commonly on the trunk or face**. It tends not to cross the body's midline.
- A person can experience symptoms like **headache, photophobia, and malaise several days before the rash appears**.
- The rash, usually painful, itchy or tingly, evolves into clusters of vesicles over several days, with new vesicles forming for 3 to 5 days.
- Eventually, the rash dries, scabs, and typically heals in 2 to 4 weeks. Though **permanent skin discoloration and scarring may occur in some cases**.

#### Complications unmasked

- PHN is the most common complication of shingles.
- Herpes zoster ophthalmicus can result in eye complications, including vision loss.
- Disseminated zoster is more rare than localized shingles, and can affect the lungs, liver, and central nervous system.



#### Other complications of Herpes zoster include:

- Bacterial superinfection of the lesions, usually due to Staphylococcus aureus.
- Cranial and peripheral nerve palsies.



#### Quick facts

- Approximately 1 in 3 Americans will get shingles in their lifetime.
- While most people have only one episode, shingles can recur.
- Shingles in children is rare.
- Approximately 1-4% of shingles patients are hospitalized for complications. Hospitalization is more likely for older adults and those with weakened immunity.

- About 30% of people hospitalized have compromised or suppressed immune systems.
- It's estimated fewer than 100 deaths occur per year. Almost all deaths occur in older adults or those with compromised or suppressed immune systems.

#### How to recognize shingles

Diagnosing shingles is usually straight-forward once a rash appears, but can be confusing without a rash. Shingles is sometimes confused with:

- herpes simplex
- insect bites
- impetigo
- papular urticaria
- contact dermatitis
- drug eruptions

Managing herpes zoster patients involves infection control tailored to their immune status and the extent of the rash (localized or disseminated).<sup>1</sup>

#### Administering the Shingles vaccine<sup>1</sup>

- CDC recommends 2 doses of Shingrix vaccine to help prevent shingles and complications in adults 50 years and older. Shingrix is recommended for adults 19 and older with weakened immune systems.
- For those who are immunodeficient or immunocompromised and would benefit from an accelerated series, the second dose can be administered 1-2 months after the first.
- If more than 6 months pass since the first dose, give the second dose as soon as possible.
- If the second dose is given within 4 weeks of the first, it's considered invalid, and a second valid dose should be given 2 months later.



Advocate for vaccination and help prevent Shingles complications

Reference: 1 Centers for Disease Control and Prevention. Accessed November 10, 2023. <https://www.cdc.gov/shingles/hcp/clinical-overview.html>; <https://www.cdc.gov/vaccines/vpd/shingles/hcp/shingrix/administering-vaccine.html>

## OTHERS

02



HEALTHCARE PROFESSIONAL FACING MATERIALS

### Meninge ACIP Vaccine Schedule Flashcard

Target Audience: HCPs involved in adolescent care and immunization program staff.

Objective: To reinforce HCP awareness and adherence to ACIP meningococcal vaccine schedules to support proactive patient counseling and routine vaccine reminders.

[Click on the image to download the asset.](#)

### Meningococcal vaccine schedules per ACIP<sup>1</sup>

RECOMMENDED ROUTINE SCHEDULE		11-12 YEARS OF AGE		16-18 YEARS OF AGE	
		MenACWY Quadrivalent		MenACWY Quadrivalent	
OPTIONAL SCHEDULES FOR WHEN MENB IS INDICATED THROUGH SCDM	Without Pentavalent	MenACWY Quadrivalent		MenACWY Quadrivalent + MenB Monovalent	MenB Monovalent
	With Pentavalent	MenACWY Quadrivalent		MenABCWY Pentavalent	MenB Monovalent
	Schedules currently NOT recommended by ACIP	MenACWY Quadrivalent MenABCWY Pentavalent		MenABCWY Pentavalent MenABCWY Pentavalent	MenABCWY Pentavalent MenABCWY Pentavalent

ACIP = Advisory Committee on Immunization Practices; MenABCWY = *N meningitidis* serogroups A, B, C, W, and Y; MenACWY = *N meningitidis* serogroups A, C, W, and Y; MenB = meningitis B; SCDM = shared clinical decision making.

Reference: 1. Collins J. Summary of ETR and proposed recommendations for Pfizer's MenABCWY vaccine. Presented at: Advisory Committee on Immunization Practices; October 25, 2023 Meeting. Accessed November 8, 2023. <https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2023-10-25-26/04-Meningococcal-Collins-508.pdf>

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Thank you!

