

# Be Ready to Give Multiple Vaccines at the Same Visit

**Patients will ask you about getting multiple vaccines at the same time...**with COVID-19, flu, and RSV immunizations in full swing.

Continue to listen for concerns...and share the latest facts.

Acknowledge that conflicting data with newer vaccines (COVID-19, RSV) are making headlines...but explain the latest CDC recommendation is that COVID-19, flu, and RSV vaccines CAN be given at the same time.

Reinforce that the goal is to protect against serious illness and hospitalization, especially in the most vulnerable (older adults, etc).

Keep in mind, there's no max number of vaccines you can give at one visit. Consider patient risks and likelihood of a return visit...to avoid a missed opportunity.

Remind patients that getting multiple vaccines at the same visit generally doesn't impact efficacy...and children often get many vaccines.

If giving more than one vaccine, use different arms...especially with those that might cause local reactions (COVID-19, Tdap, etc).

And if using the same arm, separate injection sites by at least 1 inch...to make it easier to identify local reactions.

Try to inject the most painful vaccine (HPV, MMR, etc) last in an arm by itself, if possible.

Keep in mind, different vaccines should not be combined in a single syringe. But give FDA-approved combo vaccines if possible. For instance, pick the combo hep A/B series, *Twinrix*, for eligible adults who need both.

Keep a callback list or make reminder calls for follow-up vaccines.

Advise patients to expect arm soreness or pain for a couple days after any IM vaccine. Recommend using the arm...not resting it...after vaccination. And suggest applying a cool compress for pain if needed.

Don't suggest using acetaminophen or NSAIDs as a "premed"...but there's no need to defer vaccination if patients already took them.

Preinjection analgesics might decrease the immune response based on mixed data in kids. But there aren't good data on whether they reduce vaccine efficacy.

Point out flu-like symptoms (aches, fever, etc) are possible, but they shouldn't be mistaken for the illness the vaccine aims to prevent.

Reinforce that inactivated vaccines can't cause the disease.

Save acetaminophen or NSAIDs for AFTER vaccination if needed. Remind patients that these work quickly to treat symptoms if they occur.

Access our *Immunization Resource Hub* for the latest updates, charts, and resources addressing vaccine administration, myths, and hesitancy.

## Key References:

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