

## INFORMATION PAPER

DHA-IHB  
6 Oct 2016

SUBJECT: Immunization Recommendations for Disaster Response Operations

1. Purpose. To provide immunization recommendations for Department of Defense (DoD) personnel supporting disaster response operations.

2. Facts.

a. Routine Adult. Ensure personnel are current for ALL routine adult vaccinations based on age and health status. Do not delay deployment pending completion of immunization series. <http://www.cdc.gov/mmwr/preview/mmwrhtml/su6201a3.htm>

b. Hepatitis A. Personnel will begin or complete the two-dose Hepatitis A vaccine series. If a dose is needed to complete the 0, 6 month schedule, administer it now. This series may be completed using the monovalent or bivalent vaccine. Further guidance on completing the vaccinations series is available at <http://www.health.mil/hepA>.

c. Hepatitis B. Personnel will begin or complete the three-dose Hepatitis B vaccine series. If a dose is needed to complete the 0, 1, 6 month schedule, administer it now. This series may be completed using the monovalent or bivalent vaccine. Further guidance on completing vaccination series is available at <http://www.health.mil/hepB>.

d. Influenza. Vaccinate personnel with the current seasonal influenza vaccine if available.

e. Tetanus. In accordance with the current Centers for Disease Control & Prevention (CDC) guidelines, responders should receive a tetanus booster if they have not been vaccinated for tetanus during the past 10 years. Td (tetanus/diphtheria) or Tdap (tetanus/diphtheria/pertussis) can be used; receiving one dose of Tdap for one tetanus booster during adulthood is recommended to maintain protection against pertussis. Consistent with CDC wound-management guidelines, anyone who develops a puncture wound or has a wound contaminated with dirt, feces, soil, or saliva needs a Td booster (or Tdap if applicable) if the most recent dose was more than 5 years earlier.

f. Rabies. Veterinarians and people involved in animal-control efforts should assess the localized risk of rabies exposure and consider their need for pre-exposure prophylaxis. Persons who are exposed to potentially rabid animals should be evaluated and receive standard post-exposure prophylaxis, as clinically appropriate.

g. Travel-Related Vaccines. When responding to a disaster outside of the United States, non-routine vaccines may be recommended based on the [CDC Health Information for International Travel](#) (commonly called the Yellow Book) or required by

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the Force Health Protection Guidance issued by the Combatant Command Surgeon's  
Office.

3. References.

a. Centers for Disease Control and Prevention. CDC Health Information for  
International Travel 2016. New York: Oxford University Press; 2016.

b. Centers for Disease Control and Prevention. Recommended Adult Immunization  
Schedule – United States, 2016. MMWR 2016; 65(4)

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