

February 20, 2019

Dear Provider:

The California Department of Public Health (CDPH) strongly recommends that every prenatal care provider have a prenatal Tdap program that includes the following activities:

1. If vaccinating on-site:

- a. **Routinize the offer of prenatal Tdap** for all pregnant women at the beginning of the third trimester to protect babies who might be born prematurely.
- b. **Ensure that staff members are aware** of their important role in helping ensure Tdap vaccination at the earliest opportunity between 27-36 weeks gestation of *every* pregnancy.
- c. **Make a strong recommendation** for Tdap vaccination, stressing the importance and safety for mother and baby.
- Document recommendation and receipt of vaccination or patient declination (if applicable) in the medical records of all prenatal patients.
- Uphold the same standard of care for all women in your practice, and offer Tdap to all
 prenatal patients at the earliest opportunity between 27-36 weeks gestation, regardless of
 payor.

2. If currently unable to vaccinate on-site:

- a. **Strongly consider** stocking Tdap vaccinations at your site. Prenatal patients seen by providers who stock vaccinations are much more likely to get vaccinated.
- b. **Make a strong recommendation and referral** for your patient to receive Tdap vaccination offsite, stressing the importance and safety for mother and baby.
- c. Assist patients in locating a local immunization provider/clinic that is covered by their insurance. Kern Family Health Care covers the Tdap vaccine between 27-36 weeks gestation of every pregnancy.
- d. **Provide patients with a prescription.** Although a prescription for Tdap vaccine is not needed, it may reinforce the importance of your recommendation.
- e. When referring patients to be vaccinated off-site, ensure patients' ability to travel off-site and that the clinic or pharmacy will administer Tdap to your patient.





- f. Follow-up at subsequent appointments to ensure that pregnant women receive Tdap vaccination at the earliest opportunity between 27-36 weeks gestation. Keep urging the mother to get vaccinated.
- g. **Document** recommendation and receipt of Tdap vaccine or patient declination (if applicable) in the medical records of all prenatal patients.
- 3. Use materials to reinforce the importance of immunizations during pregnancy.
- 4. Participate in the California Immunization Registry (CAIR).
- 5. Stay informed about the latest Tdap immunization guidelines and pertussis case data.

Your practice will be notified if an infant born to one of your prenatal patients develops pertussis before four months of age. The California Department of Public Health is working with local health departments to use a pertussis supplemental form to systematically obtain information about barriers and best practices for ensuring that prenatal patients receive Tdap vaccine at the earliest opportunity between 27-36 weeks gestation. By collecting this information, public health departments will learn how to best support you in addressing barriers to vaccinating pregnant women.

For additional information on prenatal Tdap immunization, please review resources from:

American College of Obstetrics and Gynecology:

http://www.immunizationforwomen.org

California Department of Public Health:

- https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/Immunization/Pertussis-CDPH-DHCSletterPrenatalTdapProgram.pdf
- http://eziz.org/resources/pertussis-promo-materials/prenatal-tdap/

Center for Disease Control and Prevention:

https://www.cdc.gov/pertussis/pregnant/index.html

Sincerely,

Martha Tasinga, MD, MPH, MBA Chief Medical Officer

