Promoting Immunizations in a Challenging Environment:

Keeping up and Keeping Well

October 29, 2025

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Disclosure:

Dr. Miotto has no financial relationships or conflicts of interest to declare.

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Introduction

Let's talk about:

- What's "changed"
- What's really not changed that much
- What we can do to keep our heads above water and resist the chaos of the times while delivering the best care to students and their families?

Non-partisan, Politically Aware and Sensitive, Advocacy Forward

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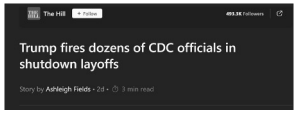
June 2025

July 2025

August 2025

September 2025

What's next ....



October shutdown

Mary Beth Miotto MD, MPH
Immunization Landscape 2025
October 29, 2025

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The history of immunization schedules:

Don't panic:

We've been here before

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Back to the Future: History of AAP and Vaccines

Smallpox: 1700s on…(in Western hemisphere)

AAP established in 1930

Tetanus, Diphtheria, Pertussis: 1948

Tetanus, diphtheria, and pertussis (whooping cough) were three diseases that had been deadly threats to children for centuries. In 1948, a combined vaccine was developed and recommended for use by the AAP to protect children from these three deadly diseases. The vaccine reduced deaths from these diseases by 99%, saving the lives of millions.

Polio: 1955

Measles: 1965

HiB: 1989

Hep B: 1991

Varicella: 1996

Pneumococcal: 2001

HPV: 2007

Rotavirus: 2008

Meningococcal: 2014

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History of the AAP, ACIP & Vaccines

Before 1964: AAP and other specialty societies had sole responsibility for vaccine guidance

1964: Creation of ACIP as a technical advisory committee of the US Public Health Service (not CDC) and still uninvolved in the immunization schedule

1972: ACIP became a federal advisory committee and moved to CDC

1993: ACIP gave guidance on which vaccines should be "free" through Vaccines For Children

1995: A unified harmonized child/adolescent immunization schedule approved by ACIP, AAP and the American Academy of Family Physicians

2010: ACIP began using Grading of Recommendations Assessment, Development and Evaluation (GRADE) system

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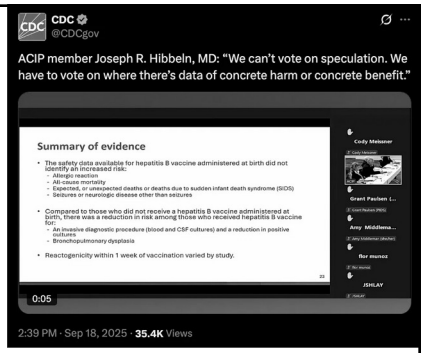
Problem

-Not much experience within the new ACIP panel

-The organizers/leaders threw out the rule books (GRADE and Evidence to Recommendation rubric) that keep the discussions, analysis, and votes relevant, science-based and on-target.



BUT

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Where we are now:CDC

-Influenza vaccine (July changes):
Multidose vials that used thimerosal to keep them free of bacteria when needles entire them over time are no longer available in US. They were really never used with children.
NOT MUCH IMPACT ON INDIVIDUAL FAMILIES

-COVID-19 vaccine (September changes):
Parents & their medical team can choose to initially immunize or access a booster dose using shared decision making. Older children/ adults can get the vaccine at a pharmacy without a prescription.
LITTLE CHANGE

-MMR-Varicella vaccine (September changes):
Parents & their medical team can no longer choose to use the combination MMR-V vaccine for the 1st dose before the child is 4 years old. The MMR-V can be used at age 4.
DECREASES FLEXIBILITY BUT NEGLIGIBLE IMPACT

Hepatitis B vaccine BIRTH DOSE
After being presented with evidence of the safety and greater effectiveness of the birth dose of Hepatitis B vaccine, the ACIP panel decided on Friday morning to put the vote on changing the recommendations on Hepatitis B vaccine on hold.
NO CHANGES AT THIS TIME

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AAP, ACOG, ACP, IDSA, and others establish evidence-based immunization schedules

AAP releases evidence-based immunization schedule; calls on payers to cover recommendations

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Where we are now: AAP and other medical and nursing organizations

Most major health professional societies:

American Academy of Pediatrics (AAP)
American College of Obstetrics & Gynecology (ACOG)
American Academy of Family Physicians (AAFP)
American Medical Association (AMA)
American College of Physicians (ACP)
Infectious Disease Society of America (IDSA)
American College of Nurse-Midwives (ACNM)
National Association of Pediatric Nurse Practitioners (NAPNAP)

Support the SEPTEMBER 2024 ACIP harmonized immunization schedules for children and adults and will continue to recommend these evidence-based schedules for their patients and the public.

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Where we are now: AAP and other medical and nursing organizations

-Influenza vaccine:

Although the original thimerosal changes were out of extreme caution, the science of thimerosal eventually showed it to be a non-issue. However, the industry had already moved away from thimerosal. The public health issues are there but individual families were never affected.

NOTHING TO SEE HERE

-MMR-Varicella combination vaccine:

The AAP and other schedules retain the ability of the parent-healthcare team partnership to decide on using MMR-V before age 4. Schedule remains unchanged.

MINIMAL DIFFERENCE EXCEPT FOR FLEXIBILITY

-COVID-19 vaccine :

Parents & their medical team are encouraged to initially vaccinate or access a booster dose at ages 6 months up. It was always shared decision making.

NO REAL DIFFERENCE EXCEPT “RECOMMEND” vs “ALLOW”

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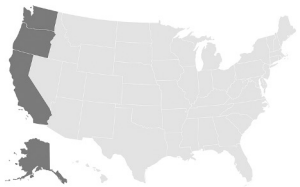
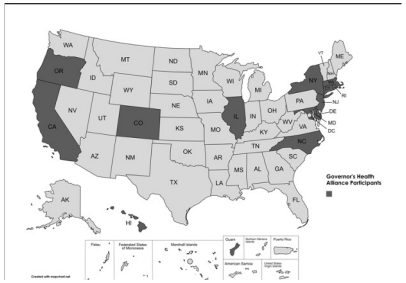
West Coast Health Alliance



Northeast Public Health Collaborative

Governors Public Health Alliance



The recommendations are informed by the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, and the American Academy of Family Physicians.

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An Example of State Specific Executive Actions: Massachusetts

The Governor and the Massachusetts Department of Public Health will develop their own immunization schedules based on the best advice of major medical professional societies.

The American Health Insurance Plans and all Massachusetts health insurers will continue to cover COVID vaccine as they were in 2024.

It appears that these entities will work together to ensure access to the entire 2024 science-backed immunization schedules.

Take home message:
Connect with your state Department of Health resources
Connect with your local NASN chapter
Connect with your state AAP Chapter

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So… what is going on in State Legislatures?

Figure 1: Total Vaccine-Related Legislation, August 1, 2024 - June 1, 2025

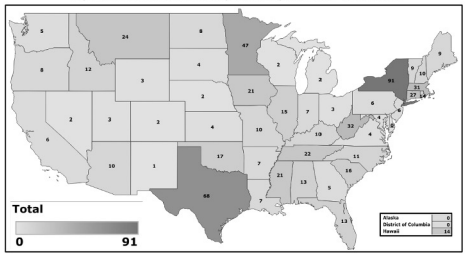

Figure 3: Ten States with Highest # of Effective Vaccine-Related Bills

New York	60
Texas	56
Minnesota	30
West Virginia	30
Montana	23
Connecticut	22
Massachusetts	21
Mississippi	18
Iowa	17
Oklahoma	16

Figure 4: Ten States with Fewest # of Effective Vaccine-Related Bills

Alaska	0
Delaware	0
District of Columbia	0
New Mexico	1
Colorado	2
Michigan	2
Nebraska	2
Nevada	2
Ohio	2
Wisconsin	2

From the 2024/2025 State Legislative Sessions A REVIEW OF VACCINE-RELATED LEGISLATION JULY 30, 2025 Summary Report of the Association of Immunization Managers:
https://www.immunizationmanagers.org/content/uploads/2025/09/2025-State-Vaccine-Related-Legislation-Report_092025.pdf

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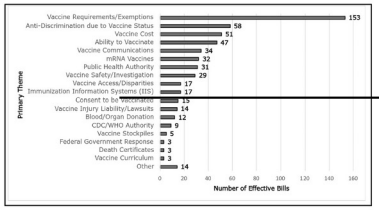
Changes in State Laws around Vaccines through May 2025: A Mixed Bag

Figure 6: Effective Vaccine-Related Bills by Primary Theme, August 1, 2024-June 1, 2025 (% Change Compared to August 1, 2023-June 1, 2024)



Primary Theme	# Effective Bills	% Change
Vaccine Requirements/Exemptions	153	34.2%
Anti-Discrimination due to Vaccine Status	58	11.5%
Vaccine Cost	51	466.7%
Ability to Vaccinate	47	17.5%
Vaccine Communications	34	277.8%
Public Health Authority	31	121.4%
mRNA Vaccines	32	220.0%
Vaccine Safety/Investigation	29	-14.7%
Immunization Information Systems (IIS)	17	-19.0%
Vaccine Access/Disparities	17	*(New Theme)*
Consent to be Vaccinated	15	114.3%
Vaccine Injury Liability/Lawsuits	14	*(New Theme)*
Blood/Organ Donation	12	9.1%
CDC/WHO Authority	9	12.5%
Vaccine Stockpiles	5	*(New Theme)*
Vaccine Curriculum	3	*(New Theme)*
Death Certificates	3	-57.1%
Federal Government Response	3	*(New Theme)*

Exemptions from Vaccine Requirements #1

Vaccine Cost #3

Discrimination Against Vaccine Refusal #2

"Ability to Vaccinate" #4

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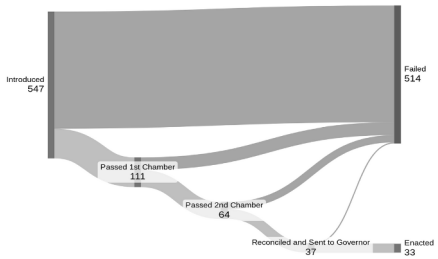
Legislative Year 24-25 Showed Political Movement
No word on '25-'26 yet..



But School Nurses Are Still HIGHLY Trusted and Legislators Want to Hear from YOU!

From the 2024/2025 State Legislative Sessions A REVIEW OF VACCINE-RELATED LEGISLATION JULY 30, 2025 Summary Report of the Association of Immunization Managers:
https://www.immunizationmanagers.org/content/uploads/2025/09/2025-State-Vaccine-Related-Legislation-Report_092025.pdf

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What may be in the Federal CDC pipeline:

CDC Changes in Hepatitis B Vaccination
CDC Changes in MMR Vaccine

What decisions have been postponed:
-Additional Options for RSV Prevention
-Single HPV Dose
-Change in Meningococcal Vaccine Guidance

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The Science Hasn't Changed

No NEW science has been Introduced

This is Politics---
All of us can keep caring for the kids
---and supporting their families

Talk to your physician.
Talk to your family.
Talk to your community.

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What's in YOUR "Go Bag"?

*Updated Immunization schedule
*COVID immunization instructions
*HealthyChildren.org parent education
*AAP.org
*Vaccine Integrity Project
*Immunize.org
*Local "School Nurse Buddy" on speed dial
*Local "Pediatrician Buddy" on speed dial
*A Solid Sleep Schedule and ways to relax

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Resources:

AAP Updated Evidence-Based Immunization Schedule; AAP-Immunization-Schedule.pdf

National Association of School Nurses (NASN) Position Statement: Immunization and Vaccination Requirements - , National Association of School Nurses, National Association of School Nurses. 2025

CDC Immunization Schedule (10/25/25);Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger; 2025 U.S.

Immunize.org Clinical Resources; https://www.immunize.org/

CIDRAP/The Vaccine Integrity Project from University of Minnesota; Vaccine Integrity Project - CIDRAP

Varied Parent Information Articles on Vaccination; Immunizations - HealthyChildren.org

Updated AAP information on the COVID-19 Vaccine in Children and Youth; Recommendations for COVID-19 Vaccines in Infants, Children, and Adolescents: Policy Statement | Pediatrics | American Academy of Pediatrics

NASN Building Family Confidence in the COVID-19 Vaccine: Framing Strategies for School Nurses [Toolkit] | NASN Learning Center

NASN Vaccine Hesitancy and the School Nurse's Role to Alleviate Parents Concerns [Enduring] | NASN Learning Center

NASN School-Located Vaccination: Role of School Nurses in Improving Student Vaccination [Enduring] | NASN Learning Center

NASN Focus on Fall: Respiratory Illness Vaccines to Support Student and Staff Wellness | NASN Learning Center

AAP COVID Vaccine Dosing Guide; COVID Vaccine Dosing_Quick Reference.pdf

Avoiding Nurse Burnout; Interventions to Overcome Nurse Burnout

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Thank You

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