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Area	Trauma Surgical Critical Care
Applicability	Erlanger Health - Baroness

Post-splenectomy Vaccination Practice Management Guideline

1. Process/Procedure Description

Patients status post splenectomy following trauma need lifetime monitoring and health-maintenance. Information will be provided to these trauma patients to allow for proper follow-up and health care maintenance by the Trauma Service.

2. Who Should Read This Process/Procedure?

Trauma Attending, surgery residents, Trauma APPs

3. Process/Procedure

Step:	Process Instructions/Description:
A.	Background
	Patients status post splenectomy as a result of trauma are more susceptible than the general population to certain serious infections. It is recommended that a specific group of immunizations be given immediately following and at specified times throughout the patient's life to help protect against those infections.
B.	Recommended Vaccination Schedule:
	The following schedule is in accordance with Erlanger's current formulary:

Vaccine	In-hospital	2 month Follow-up	6 month Follow-up	Long-term
Pneumococcal 20-Valent conjugate (Prevnar 20)†	X	-	-	-
Meningococcal (A, C, Y, W-135) (Menveo)	X	X	-	Every 5 years
Meningococcal serogroup B (Bexsero)	X	X	X*	*1 booster 1 year after primary series, then every 2-3 years
Haemophilus influenza type B (PedvaxHIB)	X	-	-	-
Influenza	X During Flu season	-	-	Annually

†If patient has received PPSV23 OR PCV13 must wait ≥ 1 year to administer PCV20
If patient has received PPSV23 AND PCV13 must wait ≥ 5 years to administer PCV20
If patient has received PCV20 OR PCV21 no additional dose recommended

C. In-Hospital Vaccinations

While an in-patient on the trauma surgery service, the patient will receive an initial round of vaccinations. These are contained in the order set named EPHS Inpatient Post-splenectomy vaccines. They will be given once it is determined the patient is likely to be discharged in the next 24 hours.

D. At Discharge

At the time of the patient's discharge, verbal and written information regarding the recommended vaccination schedule will be provided. The patient's After-Visit Summary (AVS) will be populated with the dot phrase ".SPLENECTOMY" which will attach the following information to the patient's discharge paperwork:

"Post-splenectomy long-term management:
While in the hospital, you received vaccines to help prevent certain infections. These vaccines were for pneumococcal, meningococcal, and H. flu bacteria.
It is recommended that you get the following additional vaccines to help prevent infections long-term through your primary care provider or local health care center:
THIS IS YOUR RESPONSIBILITY
• Meningococcal vaccines should be repeated as outlined in the attached table
• Tetanus/diptheria vaccine should be repeated every 10 years
• Influenza vaccine should be repeated annually"

E. Post-surgery or hospitalization office/clinic follow-up

The recommended vaccination schedule will be reviewed with the patient at his follow-up visit in the trauma clinic or office, usually within 2 weeks of surgery or discharge. At that time, a pre-printed flyer with the vaccination schedule clearly contained will be provided to the patient for home use and reference.

References:

1) Freeman JJ, Yorkgitis BK, Haines K, Koganti D, Patel N, Maine R, Chiu W, Tran TL, Como JJ, Kasotakis G. Vaccination after spleen embolization: A practice management guideline from the Eastern Association for the Surgery of Trauma. Injury. 2022 Nov;53(11):3569-3574. doi: 10.1016/j.injury.2022.08.006. Epub 2022 Aug 4. PMID: 36038390.

Approval Signatures

Step Description	Approver	Date
VP Approval	Jessica Holladay: VP & CNO Surg & Trauma Svcs	04/2026
Trauma Services Committee Approval	Stephanie Spain: Trauma Prgm Mgr Adult	04/2026
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Applicability

Erlanger Health - Baroness