

Making the Meningitis Conversation Count

Your Guide to Confident Meningitis Vaccine Discussions

Ensure your patients are vaccinated against all **5** serogroups most likely to cause meningococcal meningitis:

A-B-C-W-Y

Meningococcal Vaccines Available in the United States¹

MenACWY vaccine

All 11- to 12-yr-old patients should get a MenACWY vaccine, with a booster shot at 16 yr of age.

MenB vaccine

Teens and young adults 10-23 yr of age may also get a MenB vaccine, preferably at 16-18 yr of age, with a second dose 6 mo later.

MenABCWY vaccine

An option for people 10 yr of age or older who are getting MenACWY and MenB vaccines at the same visit, with a second dose of MenB 6 mo later.

Your words can stop meningitis before it starts.

Use these 5 tips to make every discussion count:

1

Lead with the “why”

- Explain the severity, speed, and long-term effects of meningococcal disease in plain language.²
- Emphasize that, although rare, meningococcal disease is unpredictable, moves very fast, and is potentially fatal within 24 hours. Antibiotics may not be effective once infection occurs.^{2,3}



2

Address all types of vaccines (MenACWY, MenB and, if relevant, MenABCWY) clearly

- Explain that MenACWY and MenB protect against different strains, and this is why they are needed to be as protected as possible.¹
- Walk through recommended timing and spacing between doses.



3

Make it personal

- Share personal stories of patients and families affected by meningitis.
- Highlight that healthy, active people can be affected within hours, with higher-risk groups including teens in dorms, athletes, military recruits, and all young adults (not just college students) because of how they socialize.⁴
- Explain that Meningitis B is responsible for all college campus outbreaks in the US since 2011.⁵



4

Recommend with confidence and provide resources

- Present these vaccines as a standard part of adolescent and young adult care, using strong, clear language: “I recommend...”
- Take a presumptive approach: “Now that you’re 16, you’re due for your second dose of MenACWY and your first dose of MenB.”
- Offer printed or digital resources from trusted sources (ASMP, Immunize.org, CDC, AAP).
- Direct them to meningitisprevention.org to learn more.



5

Be consistent across the care team.

- Train all staff (front desk, medical assistants, RNs, PAs, NPs) so they can confidently answer questions and reinforce the same talking points at every patient interaction and touchpoint.



A clear, confident conversation with patients and parents is the first step to strong prevention

References

1. [cdc.gov/meningococcal/hcp/vaccine-recommendations/index.html](https://www.cdc.gov/meningococcal/hcp/vaccine-recommendations/index.html).
2. Marshall. Infect Dis Ther. 2024;13:2213.
3. [who.int/news-room/fact-sheets/detail/meningitis](https://www.who.int/news-room/fact-sheets/detail/meningitis).
4. Watle. Epidemiol Infect. 2020;148:e80.
5. [cdc.gov/eid/article/25/3/18-1574_article#:~:text=Historically%2C%20most%20meningococcal%20disease%20outbreaks,the%20resulting%20MenB%20vaccination%20responses.](https://www.cdc.gov/eid/article/25/3/18-1574_article#:~:text=Historically%2C%20most%20meningococcal%20disease%20outbreaks,the%20resulting%20MenB%20vaccination%20responses.)