

Advisory Committee on Immunization Practices (ACIP)

Role of the Advisory Committee on Immunization Practices in CDC's Vaccine Recommendations

- The Centers for Disease Control and Prevention (CDC) sets the U.S. adult and childhood immunization schedules based on recommendations from the Advisory Committee on Immunization Practices (ACIP).
- Before recommending any vaccine, ACIP considers many factors, including the safety and effectiveness of the vaccine.
- Candidates for ACIP membership are screened carefully prior to being selected to join the committee.
- ACIP develops vaccine recommendations for children and adults. The recommendations include the age(s) when the vaccine should be given, the number of doses needed, the amount of time between doses and precautions and contraindications.

What is ACIP?

The Advisory Committee on Immunization Practices (ACIP) is a group of medical and public health experts that develops recommendations on how to use vaccines to control diseases in the United States.

ACIP consists of 15 experts who are voting members and are responsible for making vaccine recommendations. The Secretary of the U.S. Department of Health and Human Services (DHHS) selects these members after an application and nomination process. Fourteen of these members have expertise in vaccinology, immunology, pediatrics, internal medicine, nursing, family medicine, virology, public health, infectious diseases, or preventive medicine. One member is a consumer representative who provides perspectives on the social and community aspects of vaccination.

In addition to the voting members, there are 30 non-voting representatives from professional organizations that are highly regarded in the health field. These members comment on ACIP's recommendations and offer the perspectives of groups that will implement the recommendations. Examples of these professional organizations include:

- American Academy of Pediatrics
- American Academy of Family Physicians
- American College of Nurse Midwives
- American College of Obstetricians and Gynecologists
- American College of Physicians

Certain people are not considered for ACIP membership. For example, people who are directly employed or have an immediate family member directly employed by a vaccine manufacturer, hold a patent on a vaccine or related product, or serve on a Board of Directors of a vaccine manufacturer are excluded from ACIP membership.

Being involved in a vaccine study does not disqualify someone from consideration for ACIP membership. Therefore, people who lead vaccine studies at their respective institutions may become ACIP members, but they must abstain from voting on recommendations related to the vaccine they are studying. In addition, they cannot vote on any other vaccines manufactured by the company funding the research or on any vaccines that are similar to the one(s) they are studying.

This work is licensed under the Creative Commons Attribution-NoDerivatives 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nd/4.0/>

This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

How Does ACIP Make Decisions about Vaccine Recommendations?

ACIP typically holds three meetings each year at the CDC in Atlanta, Georgia to make vaccine recommendations. Due to the coronavirus disease 2019 (COVID-19) pandemic, ACIP meetings have been held more frequently and have been virtual only (no in-person attendance). All meetings are open to the public and available online via webcast. During these committee meetings, members review findings and discuss vaccine research and scientific data related to vaccine effectiveness and safety, clinical trial results and manufacturer's labeling or package insert information. Outbreaks of vaccine-preventable disease or changes in vaccine supply, such as vaccine shortages, also are reviewed during these meetings. The recommendations include who should receive the vaccine, the number of doses needed, the amount of time between doses and precautions and contraindications. During ACIP meetings and prior to each voting session, there is designated time for oral public comment, in addition to the opportunity for written public comment.

In addition to these meetings, ACIP members participate in work groups. These work groups are active all year to stay up to date on specific vaccines and vaccine safety information. For example, before a vaccine is even licensed by the U.S. Food and Drug Administration (FDA), an ACIP work group will thoroughly review all available scientific information about the vaccine so that they will be prepared to present information to ACIP about the vaccine once it is licensed. At this point, the vaccine already has undergone several phases of testing for safety and efficacy with thousands of volunteers. The licensure process can take several years. The work group carefully reviews data available on the vaccine in order to make recommendations to ACIP, but work groups do not vote on the final recommendation. The work group presents its findings to the entire ACIP at several meetings before ACIP members vote on whether to recommend the vaccine and who should receive the vaccine. Once the CDC Director has approved ACIP recommendations, they are published in the CDC's Morbidity and Mortality Weekly Report (MMWR). Upon publication, the recommendations represent the official CDC recommendations for immunizations in the United States.

Each year, ACIP's recommendations result in the official U.S. adult and childhood immunization schedules.

What Does ACIP Consider in the Vaccine Recommendation Process?

In the information that ACIP reviews for each vaccine always includes:

- The safety and effectiveness of the vaccine when given at specific ages. Only vaccines licensed or authorized by the FDA are recommended and vaccine manufacturers must conduct rigorous studies to show that a vaccine is safe and effective at specific ages.
- The severity of the disease. Vaccines recommended for children and adults prevent diseases that can be serious, potentially causing long-term health problems or death.
- The number of people who get the disease if there is no vaccine. Vaccines that do not provide benefit to many people may not be recommended for everyone.
- How well a vaccine works for people of different ages. The immune response from vaccine can vary depending on the age when the vaccine is given.
- How practical the recommendations are to put into practice, factors that can impact the feasibility of implementing a vaccine recommendation can also be considered.

This work is licensed under the Creative Commons Attribution-NoDerivatives 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nd/4.0/>

This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

Where Can I Find ACIP's Vaccine Recommendations?

All of ACIP's recommendations are posted online. Once they are reviewed and approved by the CDC Director and Department of Health and Human Services, recommendations are published in the CDC's MMWR. The MMWR publication represents the official CDC recommendations for immunizations of the U.S. population.

<https://www.cdc.gov/vaccines/acip/committee/role-vaccine-recommendations.html>

<https://www.cdc.gov/vaccines/acip/index.html>

SAMPLE

This work is licensed under the Creative Commons Attribution-NoDerivatives 4.0 International License. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nd/4.0/>

This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.