

Monkeypox Vaccine JYNNEOS™	
Vaccine Ordering Vaccine	 Vaccines are available for order through the ND Vaccines for Children (VFC) and Vaccines for Adults (VFA) for eligible patients. Additional information can be found on the <u>Vaccine Coverage Table</u>. Limited quantities of vaccine are also available for order from NDHHS for commercially insured adults. Vaccine can be ordered through the North Dakota Immunization Information System (NDIIS). Please email the <u>vaccine@nd.gov</u> or leave a comment in the NDIIS vaccine order when ordering mpox doses to be used for insured adults. Vaccine must be ordered in full package quantities. Full packages will contain 10 single-dose vials.
shipments	Vaccine will be shipped frozen at -20°C.
Vaccine presentation	Single-dose 0.5 mL vialPackage NDC 50632-0001-03
Vaccine storage	 Keep Frozen at -25°C to -15°C. When stored at -25°C to -15°C, labeled expiration date applies. When thawed and refrigerated at 2-8°C temperature, unopened vials can be used for 4 weeks. Based on information provided directly by the manufacturer lot #96867 may be stored at refrigerated temperatures up to 8 weeks (this differs from the package insert). DO NOT REFREEZE VACCINE VIALS DO NOT STORE IN DORM-STYLE REFRIGERATORS
Vaccine thawing,	Allow the vaccine to thaw and reach room temperature before use.

preparation, When thawed, JYNNEOS™ is a milky, light yellow to pale white colored suspension. The vials should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and and container permit. If either of these conditions exists, the vaccine should not be administered. administration • Swirl the vial gently before use for at least 30 seconds. • Withdraw a dose of 0.5mL into a sterile syringe for injection. • Administer JYNNEOS™ by subcutaneous injection, preferably into the upper arm (tricep). If the amount of vaccine remaining in the vial cannot provide a full dose, discard the vial and contents. • Do not pool excess vaccine from multiple vials. Vaccine All doses should be documented in the NDIIS within 24 hours of administration. Doses provided by NDHHS should be entered into the NDIIS using public as the funding source and other state eligible for the VFC status. **Documentation** • Vaccine Name: smallpox/monkeypox Brand: Jynneos™ MVX: BN CVX: 206 Unit of Sale NDC (11-digit): 50632-0001-03 Unit of Sale NDC (10-digit): 50632-001-03 Unit of Use NDC (11-digit): 50632-0001-01 Unit of Use NDC (10-digit): 50632-001-01 **CPT** code Current Procedural Terminology (CPT) codes have been created that streamline the reporting of orthopoxvirus and monkeypox testing and immunizations currently available on the United States market. View this AMA webpage which outlines the codes and offers further guidance to providers. • 90611: Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use **Special** JYNNEOS™ may be administered at the same time as other vaccines. It is highly recommended that hepatitis A considerations and meningococcal conjugate vaccines be offered at the same time, if not previously vaccinated. However, there are additional considerations if administering a COVID-19 vaccine. (Interim Clinical Considerations for Use of COVID-19 Vaccines) • There is no required minimum interval between receiving a dose of any COVID-19 vaccine and an orthopoxvirus vaccine, either JYNNEOS or ACAM2000 vaccine (e.g., for mpox prevention), regardless of which vaccine is administered first.

- Use of JYNNEOS vaccine should be prioritized over ACAM2000 when co-administering a COVID-19 vaccine and an orthopoxvirus vaccine.
- People, particularly adolescent or young adult males, who are recommended to receive both vaccines might
 consider waiting 4 weeks between vaccines. This is because of the observed risk for myocarditis and
 pericarditis after receipt of ACAM2000 orthopoxvirus vaccine and COVID-19 vaccines, and the hypothetical
 risk for myocarditis and pericarditis after JYNNEOS vaccine. However, if a patient's risk for mpox or severe
 disease due to COVID-19 is increased, administration of mpox and COVID-19 vaccines should not be
 delayed.

The immune response takes two weeks after the second dose for maximal development.

People with a severe allergy to any component of the vaccine (gentamicin, ciprofloxacin, egg protein) should not receive this vaccine.

Consider offering or referring for other services the patient may need, including STD testing and HIV PrEP.