

Cochlear Implants and Vaccination for Meningitis

Thank you for choosing Ear & Hearing at the Center for Neurosciences as your Cochlear Implant (CI) Center of choice. We welcome you to our family. As you have heard during your office visit, our process for Cochlear implantation includes (1) appropriate CI specific hearing tests that meet FDA and insurance specific guidelines; (2) imaging studies such as high resolution temporal bone CT scan and MRI Brain with Internal Auditory Canal protocol; (3) medical clearance for general anesthesia from your primary care physician and specialists involved in your care; and (4) our recommendation that you consider vaccination per CDC guidelines.

Various vaccinations are recommended across the age range (children, adolescents, working-age adults, and adults over 65 years). Those should be discussed and provided by your primary care guidelines. This document is specific to the Pneumococcal vaccine guidelines for Cochlear implant recipients. **WE do not require vaccination for Cochlear implantation since vaccination in the United States remains voluntary. However, we do recommend that you seriously consider vaccination because it may decrease your risk of serious infections like meningitis.**

Vaccination Guidelines in Children and Adults (2/2017)

- All infants are routinely given **PCV13 (Prevnar 13)** at ages 2, 4, and 6 months with a booster at age 12 to 15 months by their pediatrician. Children who fall behind can be given a “catch up” dose through age 6 years.
- If your child has received the PCV7 series from your pediatrician, he/she should receive a single dose of PCV 13 at least 8 weeks after the last dose of PCV7.
- PPSV23 (**Pneumovax**) was licensed in 1983 and is recommended for all CI patients > 2 years of age
- If you received the **PPSV23 (Pneumovax)** vaccine but not PCV13, a supplemental dose of PCV13 should be given one year after PPSV23.
- For children with Cochlear implants who have completed all recommended doses of PCV13 but have never received PPSV23, one dose of the pneumococcal polysaccharide vaccine (PPSV23) should be administered after age 2 years; this dose of PPSV23 should be given at least 2 months after the last dose of PCV13.
- Children aged 6-18 years with Cochlear implants who have not received PCV13 (regardless of possibly having received PPSV23 or the PCV7 series) should be given a single dose of PCV13.
- Please remind your pediatrician, family physician, or internist that a booster dose of PPSV23 (Pneumovax) is recommended 5 years after the first dose in patients between 2-65 years of age. Our practice will **NOT** be maintaining long term follow up to document that this booster is given since most CI patients follow up with their ear surgeon for only 6-12 months after their operation. Therefore, it is your responsibility to work with your primary care provider on obtaining this booster.
- One dose of PCV13 followed 8 weeks later by PPSV23 is suggested for all adult CI patients after they turn age 65 years.
- If PPSV23 was administered first, we advise waiting a full year before getting PCV13.
- Alternately, any adult patient (> age 19 years) can choose to get a single dose of PCV20 rather than obtaining both PCV13 and PPSV23. This is a new guidance issued in 2022.
- This vaccination schedule should be completed at least 2 weeks prior to the date of CI surgery if patients receiving Cochlear implants want maximum protection.
- Patients with HIV should receive pneumococcal vaccination per the usual adult vaccination recommendations.

By signing below, you acknowledge that we recommended vaccination as a means of minimizing meningitis risk after CI surgery. These guidelines may change with time and you should consult with your pediatrician, internist, or family physician for the latest CDC recommendations. As mentioned earlier, vaccination is voluntary, and you can choose to proceed with surgery without vaccination.

_____ I choose to be vaccinated prior to CI surgery

_____ I choose not to be vaccinated prior to CI surgery

Printed Name: _____ Signature: _____ Date: _____