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July 14, 2015

Suzanne Johnson-DeLeon National Center for Immunization and Respiratory Diseases Centers for Disease Control and Prevention Mailstop A–19 1600 Clifton Road NE Atlanta, GA 30329

Submitted electronically to www.regulations.gov

Re: Comments on the Proposed Revised Vaccine Information Materials for Pneumococcal Conjugate Vaccine (Docket No. CDC–2015–0014)

Dear Ms. Johnson-DeLeon:

On behalf of the American Nurses Association (ANA), we are pleased to comment on the *Proposed Revised Vaccine Information Materials for Pneumococcal Conjugate Vaccine*, announced in the Federal Register on May 20, 2015. As the only full-service professional organization representing the interests of the nation's 3.4 million registered nurses (RNs), ANA is privileged to speak on behalf of its state and constituent member associations, organizational affiliates, and individual members. RNs serve in multiple direct care, care coordination, and administrative leadership roles, across the full spectrum of health care settings. RNs provide and coordinate patient care, educate patients and the public about various health conditions, and provide advice and emotional support to patients and their family members. ANA members also include the four advanced practice registered nurse (APRN) roles: nurse practitioners, clinical nurse specialists, certified nurse-midwives and certified registered nurse anesthetists.¹

The draft information statement includes several references to health care providers (including the references in paragraph 3 noting that a health care provider might decide to reschedule a vaccination, or that a health care provider can provide additional information on who should get this vaccine). However, the remainder of the document refers only to "doctors" when describing providers. For example, paragraph 4 advises patients to "ask your doctor" for more information and to "tell your doctor" if you are having certain symptoms; paragraph 5 advises patients to "call a doctor" if experiencing symptoms, and notes that "your doctor" may file a report on any reactions: and paragraph 7 advises patients to "ask your doctor" for additional information. ANA recommends revising these sections of the form to include provider-neutral language.

The utilization of APRNs to provide primary care services is not a new practice. APRNs have delivered professional health services to patients for decades. In addition, in many states other health care providers assess the need for and administer certain immunizations. It is essential that information provided to the public, such as vaccine information materials, use provider neutral

¹ The Consensus Model for APRN Regulation defines four APRN roles: certified nurse practitioner, clinical nurse specialist, certified nurse-midwife and certified registered nurse anesthetist. In addition to defining the four roles, the Consensus Model describes the APRN regulatory model, identifies the titles to be used, defines specialty, describes the emergence of new roles and population foci, and presents strategies for implementation.

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language to prevent confusion among health care consumers who receive immunizations from other health care providers and who use APRNs as their primary care provider.

We appreciate the opportunity to share our views on this matter. If you have questions, please contact Mary Jo Assi, Director of Nursing Practice and Work Environment (maryjo.assi@ana.org).

Sincerely,

Debbie D. Hatmaker, PhD, RN, FAAN

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Executive Director

cc: Pamela Cipriano, PhD, RN, NEA-BC, FAAN, ANA President Marla Weston, PhD, RN, FAAN, ANA Chief Executive Officer