

Shared Clinical Decision-Making Guide on Respiratory Vaccines for Clinicians

What is Shared Clinical Decision-Making (SCDM)?

[Shared clinical decision-making](#) – also sometimes referred to as individual decision-making – is vaccine counseling in which clinicians talk with their patients about the benefits and risks of vaccination for them. Discussing a vaccine's benefits and risks already frequently occurs—both for vaccines with shared clinical decision-making (e.g., COVID-19 vaccination for healthy children and adults, or HPV vaccination in some adults) and routine recommendations.

Who Can Participate in Shared Clinical Decision-Making for Vaccines?

Primary care physicians, specialist physicians, physician assistants, nurse practitioners, registered nurses, and pharmacists can practice shared clinical decision-making in all 50 states.

How to Do Shared Clinical Decision-Making

Multiple options – and you're probably already doing it! Here are some example conversations for COVID-19 vaccine:

Conversation 1:

- *"I recommend you (your child) get the updated COVID-19 vaccine today. The vaccine information sheets you have explain the vaccine's benefits and potential risks."*
- *"Do you have any questions about the vaccines that you want to talk about?"*

Conversation 2:

- *"I see that you (your child) are due for your COVID-19 vaccine today. Generally, if you are older or have medical conditions, you are more likely to benefit from the vaccine's protection against severe disease. These vaccines cut the risk of being hospitalized by about half. The risks of vaccination are low and rare. The information sheet you reviewed shared some additional considerations."*
- *"What questions or concerns might you have that I can help answer about this vaccine?"*

Conversation 3:

- *"Now is when I recommend the updated COVID-19 and flu vaccines for you (your child)."*
- *[Patient has concerns about side effects]: "I understand that you're worried about COVID-19 vaccine side effects and that's perfectly normal. Most people have mild side effects - like a sore or red arm - or no side effects after getting a COVID-19 vaccine. What's your main concern?"*
 - *"Serious reactions to vaccines can happen but are rare. For every 1 million doses given, we see five or fewer people have a severe allergic reaction."*
 - *"Heart inflammation after a COVID-19 vaccine is rare. The risk of this kind of heart inflammation is much higher after getting COVID-19 infection than after vaccination itself."*
 - *"You can get flu, COVID-19, and RSV vaccines at the same time. Getting them together can save you time, so you don't have to come back for another visit."*

If the patient chooses to not get vaccinated after a shared discussion, try again: *"I respect your decision. I'm happy to answer any additional questions, and we can revisit at your next appointment."*

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Documenting Shared Clinical Decision-Making:

No additional documentation is required for health insurance reimbursement.

Sample EHR Documentation for COVID-19 vaccination (e.g., dot phrase, smart phrase): The patient/caregiver and I engaged in shared clinical decision-making about the benefits and risks of the 2025-2026 COVID-19 vaccine. This discussion included an opportunity for them to ask questions. No contraindication to vaccination was identified, and the patient/caregiver and I collaboratively determined the patient would benefit from vaccination. A COVID-19 vaccine was ordered in the context of shared clinical decision making and educational materials were provided.

Where applicable for patients with underlying conditions add: The patient has _____ (*indicate underlying condition*).

Frequently Asked Questions

Can a medical assistant provide shared clinical decision-making for vaccines?

- [No, they cannot](#) generally independently provide shared clinical decision-making for vaccines. SCDM needs to be made with a medical professional within their scope of practice. Please refer to your state's standards of practice for this, but it is unlikely that MAs are able to conduct SCDM.
- However, they can administer vaccines in most states, including for routinely recommended vaccines and those under shared clinical decision making if the patient has had a chance to discuss risks and benefits with clinician who does shared clinical decision making.

Are pharmacists in all states able to provide vaccines through shared clinical decision-making for all ages?

- While pharmacists have the training, experience, and expertise to do SCDM, whether they can vaccinate all ages [may differ by state](#) based on their scope of practice and authority.

Can a pharmacy tech provide shared clinical decision-making for vaccines?

- No, they cannot independently provide SCDM for vaccines. However, they can administer COVID-19 and flu vaccines in all states under the PREP Act. They can also administer vaccines under SCDM if the patient has had a chance to discuss risks and benefits with clinician who does shared clinical decision making.

Can standing orders be used for vaccines with a shared clinical decision-making designation?

- Yes, if the provider conducting the vaccine counseling and administration is certified to do SCDM for vaccines.

Does it have to be a discussion on the day of administration for shared decision making?

- Based on CDC guidance on SCDM, there is no requirement for the discussion to happen on the same day of administration. Additionally, there is no prohibition against SCDM being done by a different person than the vaccine administrator.

Does shared clinical decision-making need to be a face-to-face conversation or could a triage nurse do this via phone and recommend to walk in clinic hours?

- There is no requirement for SCDM to be a face-to-face conversation. SCDM can be done on a separate day and does not need to be done by the vaccine administrator.

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Frequently Asked Questions (cont)

Does a standard consent to treat, ICD-10 code, and CPT code for immunization counseling cover shared decision making?

- There still needs to be a discussion of the risks, benefits and alternatives of any proposed course of treatment. It would be reasonable to include a brief sentence in the visit documentation. This is dependent on the specifics of the code, but in terms of content, shared decision making regarding a vaccine should cover the same topics as immunization counseling.

Would a message through the MyChart or other portal by a qualified health provider count as shared clinical/individual decision making?

- While there is no prohibition against this per CDC guidance, a single message through a portal is not a two-way conversation and thus may not qualify as “shared” clinical decision-making. However, if there is an opportunity for patients to request additional information or engage a clinician via an electronic portal, this could meet the expectations of SCDM.

Additional Resources on Shared Clinical Decision-Making for Vaccination

- [CDC guidance and FAQs](#)
- [American Pharmacists Association article on Shared Clinical Decision-Making](#)
- [American Academy of Pediatrics News Article on Shared Clinical Decision-Making](#)
- [Champions for Vaccine Education, Equity + Progress \(CVEEP\) report on Shared Decision Making for Vaccines](#)
- [Children’s Hospital of Philadelphia article on Shared Clinical Decision-Making](#)
- [The Announcement Approach Training and Tools](#)