



Shared Clinical Decision-Making

A Quick Guide for Clinicians

What is Shared Clinical Decision-Making (SCDM)?

[SCDM](#) is a collaborative discussion between a clinician and patient/caregiver about vaccination, including the benefits and risks of vaccination. Clinicians routinely engage in this process. The [California Department of Public Health \(CDPH\)](#) recommends using SCDM for the following:

- [COVID-19](#): Additional doses for moderately or severely immunocompromised individuals
- [Hep B](#): Adults ≥60 with diabetes
- [HPV](#): Adults ages 27–45
- [Men B](#): Adolescents and young adults ages 16–23
- [Pneumococcal \(PCV20 or PCV21\)](#): Adults ≥65 who previously received PCV13 and PPSV23

Who Can Participate in SCDM for Vaccines?

Any licensed [health care provider](#) authorized to recommend vaccines may conduct SCDM. Medical assistants and pharmacy technicians cannot independently conduct SCDM. Always follow your scope of practice and CDPH recommendations.

How do you to conduct SCDM?

Most clinicians have already engaged in SCDM. It can involve a brief interaction with a patient or an extended conversation. It can take place in person, by phone, electronically, across multiple visits, or with multiple clinicians.

A strong vaccine recommendation is appropriate within SCDM.

Example talking points for providers:

- **COVID-19**: “You are due for the COVID-19 vaccine. It reduces hospitalization risk by about half. Serious adverse events from the vaccine are rare. What questions or concerns can I address?”
- **Men B vaccine**: I recommend that your teenager receive the Men B vaccine today. The Vaccine Information Statement explains the vaccine's benefits and potential risks. Do you have any questions about the vaccine?
- **If patient declines**: “I respect your decision. I’m happy to answer questions and revisit this later.”
- **If a patient has questions receiving PCV20 or PCV21**: While you’re already up to date on your pneumococcal vaccines, PCV20 or PCV21 can offer added protection against more strains.

Sample EHR Language: “The patient/caregiver and I engaged in shared clinical decision-making regarding the risks and benefits of the [vaccine]. Questions were addressed, no contraindications were identified, educational materials were provided, and the vaccine was ordered.” *(If applicable: Patient has [underlying condition].)*

Frequently Asked Questions

- **Is SCDM-designated vaccination covered by insurance?** Yes. Under [AB 144 \(2025\)](#) and [California Health and Safety Code section 120164](#), vaccines on the [CDPH immunization schedules](#) must be covered.
- **Can standing orders be used?** Yes, if SCDM has occurred with a qualifying clinician.
- **Does standard immunization counseling meet SCDM requirements?** Generally, yes, if risks, benefits, and patient questions are addressed and documented.

Additional Resources on Shared Clinical Decision-Making for Vaccination

- 2025 and 2026 Recommended Immunization Schedules:
 - [Adult](#) (ages 19 years or older) - AAFP | [Child & Adolescent](#) (ages 18 years or younger) - AAP
- [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 \(CVEEP0 report on Shared Decision-Making for Vaccines\)](#)
- [Children’s Hospital of Philadelphia article on Shared Clinical Decision-Making](#)
- [The Announcement Approach Training and Tools](#)