

SPECIAL POINTS OF
INTEREST:

- Immunization Awards & Recognition
- VFC Childhood Program Updates
- Free Tdap Vaccine- for those who Qualify
- Vax from the Past
- Around the World –Polio
- Updated Recommendations
- Ask the Immunization Nurse
- After the Shots....
- Education and Training Opportunities
- Resources Enclosed



TRIVIA
QUESTION:

Which U.S.
President's
3-year-old son
died of
diphtheria?

Immunization Awards and Recognition

Associates In Family Medicine

Whatcom County Health Dept. recently provided an award of **Excellence in the Use of the Child Profile Registry** to Associates in Family Medicine. This practice began entering immunization records manually into the registry while waiting for their EMR interface to be developed. By going the extra mile, they have found the “forecast tool” a timesaver for staff in assessing which immunizations are due. According to Toni Pullar, RN, “It makes it easier for all the staff when records are in Child Profile.”

Everson Family Medicine

This practice received an award for **Excellence in Immunizing Children** for their registry record cleanup as part of the ARRA project. Everson improved their immunization rates for their 24-35 month age group from 20% to 85%!

Peace Health Medical Group

PHMG received an award for **Excellence in Compiling & Updating Immunization Records**. This large practice made a commitment to cleaning up records in the registry during the ARRA project and improved their rates from 55% to 71%. Following the project, PHMG hired a staff person to continue cleaning up their records starting with pediatric patients! According to Bonita Criswell, Pediatric Manager, “the registry is part of our medical records”. *Continued on page 6*

VFC Childhood Vaccine Program Updates



2012 VFC Provider Compliance Site Visits

This year the Centers for Disease Control requires the local health departments to complete Compliance Site Visits on 50% of participating practices. If your practice did not receive a site visit last year, you will be contacted this year.

Why so much focus on site visits?

The federal budget for the VFC vaccine program has increased to nearly \$4 billion dollars annually. This increase in cost has placed renewed emphasis on accountability at the federal, state, local health dept. and provider levels. The increased scrutiny will be accomplished through Federal review and audits, increased Compliance Site Visits to providers, and additional focus on decreasing vaccine wastage.

Are there any new or updated requirements?

- Providers must show evidence of a **current** “certificate of calibration” for the primary refrigerator and freezer thermometers. Keep this certification handy; you will need to show this during your VFC site visit.
NOTE: The thermometers purchased by WCHD last year are due to be replaced or recalibrated around August 2012. (It may be less costly to replace rather than recalibrate.) WCHD will **not** purchase new thermometers this year; practices must purchase them privately.
- Twice daily temperature monitoring and recording **must be done manually** even if digital data loggers or alarmed electronic temperature monitoring systems are used. This applies to all practices including hospitals.

Link to thermometer currently found in your refrigerator: www.control3.com/4127p.htm

OR: www.doh.wa.gov/cfh/Immunize/documents/thermometers.pdf

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Cocooning infants by vaccinating adults can help protect infants ...

Trivia Answer:

Abraham Lincoln.

Thomas Jefferson's 2-year-old daughter died of whooping cough.

Franklin D. Roosevelt used a wheelchair as a result of polio acquired as an adult.

Benjamin Franklin was initially against vaccination for smallpox until his 4-year-old son died of the disease. He later admitted to bitterly regretting he had not vaccinated his child.

Free Tdap Vaccine is Available for those who Qualify!

Pertussis, more commonly known as whooping cough, is making a comeback. According to WCHD CD nursing supervisor Joni Hensley, "Pertussis is a cyclic disease. In 2004 and 2005 the number of pertussis cases in this community skyrocketed. It is alarming that we are beginning to see a resurgence at a time when immunization rates for pertussis are low."

In response to the pertussis resurgence, WCHD applied for and received a significant number of doses of Tdap vaccine in order to reduce the spread of pertussis and thereby protect infants. This vaccine is supplied by Sanofi Pasteur for use with **adults 19 years and over who:**

- **are less than 200% of poverty and uninsured or underinsured**
- **have contact with young children, including parents, grandparents, caregivers, nursing students, childcare workers and others.**

WCHD is working with community partners who will offer the GIFT vaccine or provide vouchers to locations that will administer the vaccine at no charge. Three pharmacies will administer the Tdap vaccine:

- **Hoagland Pharmacy, Fairhaven Pharmacy and Nooksack Valley Drug**
- In addition, these clinic will administer the vaccine at no cost:
- **Interfaith Bellingham and Ferndale, Lummi Tribal Clinic, Nooksack Clinic and WCHD.**

VOUCHERS: WCHD will partner with Peace Health St. Joseph Medical Center, WIC, OB's, BTC, childcare's and other sites to offer GIFT Tdap vouchers to their eligible patients and families.

Vax From the Past

Who was the First to Order Mandatory Inoculation of Army Recruits?

It was the year 1777 and the Commander-in-Chief of the Continental Army, George Washington, was faced with mounting smallpox epidemics causing battle delays and fear among potential recruits. Washington had survived smallpox himself at the age of 19 years, which gave him lifelong immunity. In Europe, where smallpox was endemic, many of the British troops had already been exposed giving them a decided advantage. There were even some reports that the British were deliberately spreading the disease within Boston (biological warfare?).

Inoculation required taking matter from a pustule of an infected victim and introducing it under the skin a non-immune person. The resulting case of smallpox was lighter and greatly reduced the chance of death or scarring. After much deliberation and conducted with great secrecy, Washington ordered mandatory inoculation of all recruits who had not had the disease. Some credit this move as a pivotal one, as smallpox threatened to kill more soldiers than the Redcoats!

Vaccines Around the World - Polio



The first cases of polio in more than 10 years have been reported in China. The isolated viruses were found to closely resemble the wild polio virus type 1 found in Pakistan during 2010. As a result, CDC recommends all travelers to China be up-to-date on their polio vaccine.

Polio is spread by ingesting items contaminated with the feces of an infected person. Poliovirus can also be spread through oral fluids, water, and uncooked food.

For specific travel recommendation to: <http://wwwnc.cdc.gov/travel/notices/outbreak-notice/polio-china.htm>

Updated Vaccine Recommendations

Gardasil HPV4 (Merck) Vaccine in Males:

HPV-associated cancers in males include some anal, penile, and oropharyngeal cancers caused primarily by HPV 16. ACIP estimates about 22,000 HPV 16 and 18 associated cancers occur annually with 7,000 of those in males. About 250,000 cases of genital warts caused by HPV 6 and 11 occur in sexually active males. In clinical trials, HPV4 had high efficacy for prevention of genital warts in males. No data is available on the efficacy for prevention of oropharyngeal or penile cancers, however, vaccination of males would provide direct benefits and likely would reduce transmission of HPV 6, 11, 16, and 18 in females.

ACIP Recommendations for HPV4 in Males: www.cdc.gov/mmwr/preview/mmwrhtml/mm6050a3.htm?s_cid=mm6050a3_e

- Males 11 to 12 years of age
- Males 13 through 21 years who have not been vaccinated or completed the 3 dose series
- Males 9 through 26 years **may** be vaccinated
- May be administered to immunocompromised males 9 through 26 years
- For MSM, routine vaccination for all males 9 through 26 years of age

Hepatitis B Vaccine in Adults with Diabetes: www.cdc.gov/mmwr/preview/mmwrhtml/mm6050a4.htm

On the basis of available information about HBV risk, morbidity and mortality, ACIP recommends administration of the 3-dose hepatitis B vaccine series to diabetics soon after diagnosis:

- All unvaccinated adults with diabetes mellitus 19 through 59 years of age
- May be administered to unvaccinated adults with diabetes mellitus who are ≥ 60 years of age

NOTE: Please remember State-supplied vaccine is only for children birth through 18 years of age.

*Reminder-
recall is an
important tool
for teens and
HPV vaccine!*

Ask the Immunization Nurse

An infant received vaccines at age 5 weeks and 4 days old. Can we use the 4 day grace period?

No, mainly because there is little safety or efficacy data on doses given before 6 weeks of age, and vaccines are not licensed for this age. The data that exist suggest that the response to doses given before 6 weeks is poor; the response to hepatitis B vaccine is the exception.

Which vaccines does ACIP specifically recommend that healthcare personnel (HCP) receive in order to work in a healthcare setting?

ACIP recommends that all HCP be vaccinated with 2 doses of MMR (or have evidence of immunity), 1 dose of Tdap, 3 doses of hepatitis B vaccine (for those who might be exposed to blood or body fluids at work), 2 doses of varicella vaccine (or evidence of immunity), and an annual influenza vaccine.

For more info: <http://www.immunize.org/catg.d/p2017.pdf>

Is post-vaccination testing needed for adults who receive hepatitis B vaccine?

Testing is not necessary after routine vaccination of adults.

Serologic post-vaccination testing for immunity is recommended for the following:

- Healthcare and public safety workers at high risk of continued exposure to blood on the job
- Immune compromised persons
- Sex or needle-sharing partners of HBsAg-positive persons.

NOTE: Testing should done one to two months after the last dose of vaccine.

<http://www.immunize.org/catg.d/p2109.pdf>

Happy President's Day

“After the Shots” Handout and Acetaminophen Dosage Change

Instruct Parents to Double Check Labels on Liquid Acetaminophen:

The pharmaceutical industry recently made changes to infants' and children's acetaminophen products having different concentrations. Earlier last year the FDA found that confusion caused by the differences in concentration of liquid acetaminophen for infants and children lead to overdoses in some infants causing illness, liver failure and death.

To avoid these dosing errors, manufacturers changed the concentration of the liquid infant formula to match the concentration marketed for children.

As new concentrations arrive in stores, much of the older concentrated version is still in parents medicine cabinets. Giving too little could cause the drug to be ineffective, while giving too much could result in death.

What can be done?

- ***Inform parents of the change***
- ***Urge parents and caregivers to carefully read the label.***
- ***Tell parents to use only the dosing device provided with the purchased product***
- ***Have parents consult your practice if your dosing instructions and the package label differ***
- ***Provide handout:*** <http://www.immunize.org/catg.d/p4015.pdf>

VFC Program Updates

Continued from Page 1

Recent updates and topics of interest :

- **Vaccine Orders:** Remember to include the “Doses Used” and the “Doses on Hand” for **ALL** vaccines, not just the ones being ordered. This is a CDC requirement which helps us monitor your overall vaccine supply.
- **Receiving vaccine deliveries– Important Change!** McKesson uses packing boxes guaranteed for 72 hours. They will replace vaccine shipments exposed to out-of-range temperature at no charge **ONLY if notified within 2 hours!** If you are unable to contact WCHD, contact McKesson directly at 1-877-822-7746. The vaccine should be stored appropriately (refrigerator or freezer), labeled “DO NOT USE”, and kept separately until vaccine viability is determined.
- **Wasted Vaccine:**
If a vial or syringe breaks, is contaminated or a parent changes their mind at the last minute the vaccine is considered wasted. Wasted doses cannot be returned for excise tax. Providers must report wasted doses on the Monthly Vaccine Report under the Vaccine Wasted , Expired column with a brief explanation.
- **Spoiled or Expired Vaccine:**
In addition to reporting spoiled or expired vaccines on the monthly report, providers must report all spoiled or expired vaccines on the “Vaccine Incident Report” form. These incidents indicate inventory management, ordering or storage and handling issues and may require corrective action. These unopened vaccines must be returned for the excise tax.
- **Many Children are Missing their Supplemental dose of PCV 13:**
 - * ACIP recommends that all children through 59 months of age who completed their PCV 7series receive a supplemental dose of PCV 13.
 - * According to National survey data, half of the children, ages 12—23 months received this dose, but only one quarter of children 24 through 59 months received this supplemental dose.
 - * The American Academy of Pediatrics (AAP) encourages healthcare providers to review the records of all children in this age group at every office visit and to offer this supplemental dose.
- **Updated VISs**
 - * **NOTE:** Beginning in January 2012 DOH will no longer print or distribute Vaccine Information Statements (VISs). Practices must now print their own copies. Go to: <http://www.immunize.org/vis/>
 - * **Meningococcal Interim VIS (10/14/11)** - changes in routine schedule and syncope
 - * **Hepatitis A VIS (10/25/11)** - indications for families with newly adopted children
 - * **Polio VIS (11/8/11)** - Update from Interim VIS

- **Washington Vaccine Association (WVA) Update:**

The WVA sent providers a fax and email about changes to the WVA Assessment Grid in December. Please ensure your billing systems are aware of this update to reflect the changes beginning 2/1/2012. When providers bill private health insurance for children's immunizations, the insurance plan pays an assessment on the vaccine to the WVA. These funds support Washington's universal childhood vaccine purchasing for the State Childhood Vaccine Program. *For help contact WVA at: 888-928-2224*

Education and Training Opportunities

2012 National Immunization Conference Online

This will be the **first** National Immunization Conference to be held entirely online March 26-28. There is no cost or pre-registration, but the live workshops will be limited to the first 1,000 who log in at the beginning of each session.

<http://www.cdc.gov/vaccines/events/nic/default.htm>

American College of Physicians Host a Series of Immunization Related Webinars

- Efficient Vaccine Ordering: 2/23/12, 5 p.m. ET (2 p.m. Pacific)
- Applying Quality Improvement Principles to Immunization: 3/13/12, 3 p.m. ET (noon Pacific)
- Communicating Risk-Benefit of Vaccination to Patients: 7/18/12, noon ET (9 a.m. Pacific)

To register for one or more of the sessions:

http://www.acponline.org/clinical_information/resources/adult_immunization/webinars.htm

"Vaccines and Teens" booklet available in English and Spanish

The Vaccine Education Center & the American Medical Association have updated a guide for parents and HCP about recommended vaccines for older children, their safety and the diseases they prevent.

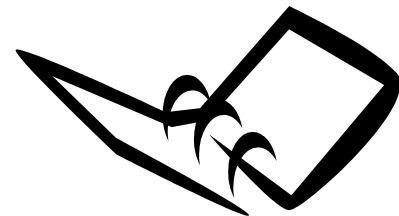
www.chop.edu/service/vaccine-education-center/order-educational-materials

(scroll to the bottom of the page under booklets)



Resources Enclosed – Please Update in Your WCHD Immunization Binder!

- Transporting Refrigerated Vaccine 3bi
- Vaccine Storage Unit Thermometer Guide 4eii
- Vaccine storage and Handling Guide 4f
- It's federal law! 6a
- Pneumococcal polysaccharide vaccine (PPSV) 9c
- Screening Questionnaire for Child and Teen Immunization 10e
- Screening Questionnaire for Adult Immunization 10f
- After the Shots... 10q
- VIS- Hepatitis A Vaccine
- VIS- Meningococcal Vaccines
- VIS- Polio Vaccine
- Decision to Not Vaccinate My Child
- If You Choose Not to Vaccinate, Understand the Risks & Responsibilities



Local Providers Receiving Immunization Awards!

Thanks to all your staff for their hard work and commitment to vaccinating children!

Toni Pullar & Sue Munger
Associates in Family Medicine

Dr. Michael Steel & Tami Schmidt
Everson Family Medicine

Bonita Criswell & Debra Taylor
Peace Health Medical Group



Did you know...

WCHD treats about 5 cases of active TB each year and in 2011 completed 18 months of treatment for a Multi-drug resistant (MDR) TB case. We also treat about 80 latent TB cases per year to prevent active disease.

This is Public Health!

WHATCOM COUNTY HEALTH DEPARTMENT



1500 North State Street
360-676-4593

WE ARE ON THE WEB

[http://www.whatcomcounty.us/health/
community/immunizations/immunizations.jsp](http://www.whatcomcounty.us/health/community/immunizations/immunizations.jsp)

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ALWAYS WORKING FOR A SAFER AND
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