



Immunizations

Central District Health Department The Shot Line

Back issues of this publication are available on our website: cdhd.idaho.gov

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We're A Tobacco Free Zone



To protect the health of at CDHD, no smoking or other tobacco use is permitted in our facilities or on our property, both indoors and out.



What's New for the Influenza Vaccine This Year?

The 2013-2014 trivalent influenza vaccine is made from the following three viruses:

- an A/California/7/2009 (H1N1) pdm09-like virus;
- an A(H3N2) virus antigenically like the cell-propagated prototype virus A/Victoria/361/2011;
- a B/Massachusetts/2/2012-like virus.

Quadrivalent vaccines containing two influenza B viruses contain the above three viruses and a B/Brisbane/60/2008-like virus.

Four New Influenza Vaccines will be available during the 2013-2014 influenza season:

- **FluMist® Quadrivalent**
Live, attenuated influenza vaccine, quadrivalent (LAIV4; MedImmune) for age 2 through 49. It will replace the trivalent formulation.
- **Fluarix® Quadrivalent**
Inactivated influenza vaccine, quadrivalent (IIV4; GlaxoSmithKline) for age 3 and above.
**Quadrivalent influenza vaccines contain the same three antigens as trivalent vaccines, along with an antigen from a second influenza B vaccine virus strain.*
- **FluBlok®**
Recombinant hemagglutinin influenza vaccine (RIV3; Protein Sciences) for age 18 through 49.
**Flublok is the only flu vaccine made without the use of eggs in any part of the manufacturing process.*
- **Flucelvax®**
Cell culture-based trivalent inactivated influenza vaccine (cclIV3; Novartis) for age 18 and above.



CDHD Mission:

Partnering to promote, protect and preserve health in our community.

Preventive Health Services Mission:

Provide accessible, affordable, integrated, preventative health services in a non-judgemental environment. To enrich lives and create a cornerstone in the foundation of our community with a healthy future.

Contact:

For vaccine questions, including schedules, updates, vaccine storage and handling, etc., please contact:

Sharon Brown, LPN

Medical Provider Liaison
Call the ShotLine at
208-321-2229

For general immunization questions, questions about the newsletter, or questions regarding community events, please contact:

Vinci Anderson

Public Health Nurse Educator
208-327-8586

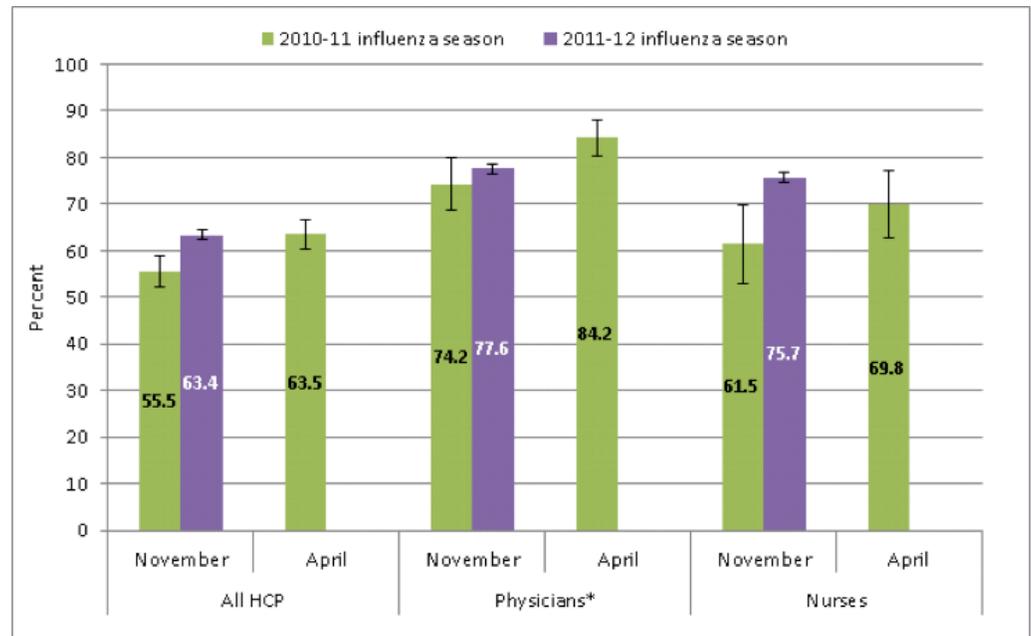
For user support and training for IRIS, please contact:

IRIS Help Desk

(208) 334-5995
iris@dhw.idaho.gov

More Health Care Personnel Getting Influenza Vaccine

The chart below shows Health Care Personnel (HCP) influenza vaccination coverage estimates by month of survey and occupation type, in the United States.



It is important for health care personnel (HCP) to get the influenza vaccination so they do not get sick with influenza or give influenza to their patients. In the 2010-11 season, 63.5 percent of HCP reported influenza vaccination. The national Healthy

People 2020 objective for HCP influenza vaccination is 90 percent. It is important to measure influenza vaccination of HCP every season to track progress toward this objective and to make sure that HCP and their patients are protected from influenza.

www.cdc.gov/flu/professionals/vaccination/health-care-personnel.htm

The Central District Health Department has made improving staff flu vaccination rates a priority. By creating teams and competition, along with incentives, CDHD achieved the Healthy People 2020 objective of 90 percent for this past flu season. Some teams even reached 100 percent participation!



School and Childcare Immunizations Requirements Fall 2013

The good news is that there are no new requirements for 2013. However, childcare providers and school nurses should be aware of a couple of issues unique to this school year.

Childcare Providers:

Please remember to watch for children needing PCV13 #5. Children who only had PCV before April 2010 and are not yet 5 years old did not have PCV13. They only had PCV7. One more dose of PCV13 is required for participation in childcare. Fortunately most of these children are turning five years old and will then have aged out of needing the vaccine.

School Nurses:

Please watch for children entering Kindergarten this year. This is the first year there will be children who have received four doses of Pentacel vaccine before age four. Those children have already had four doses of Polio. However, since the fourth dose was given before age four they will need a fifth dose for school entry.



Annual School Immunization Report

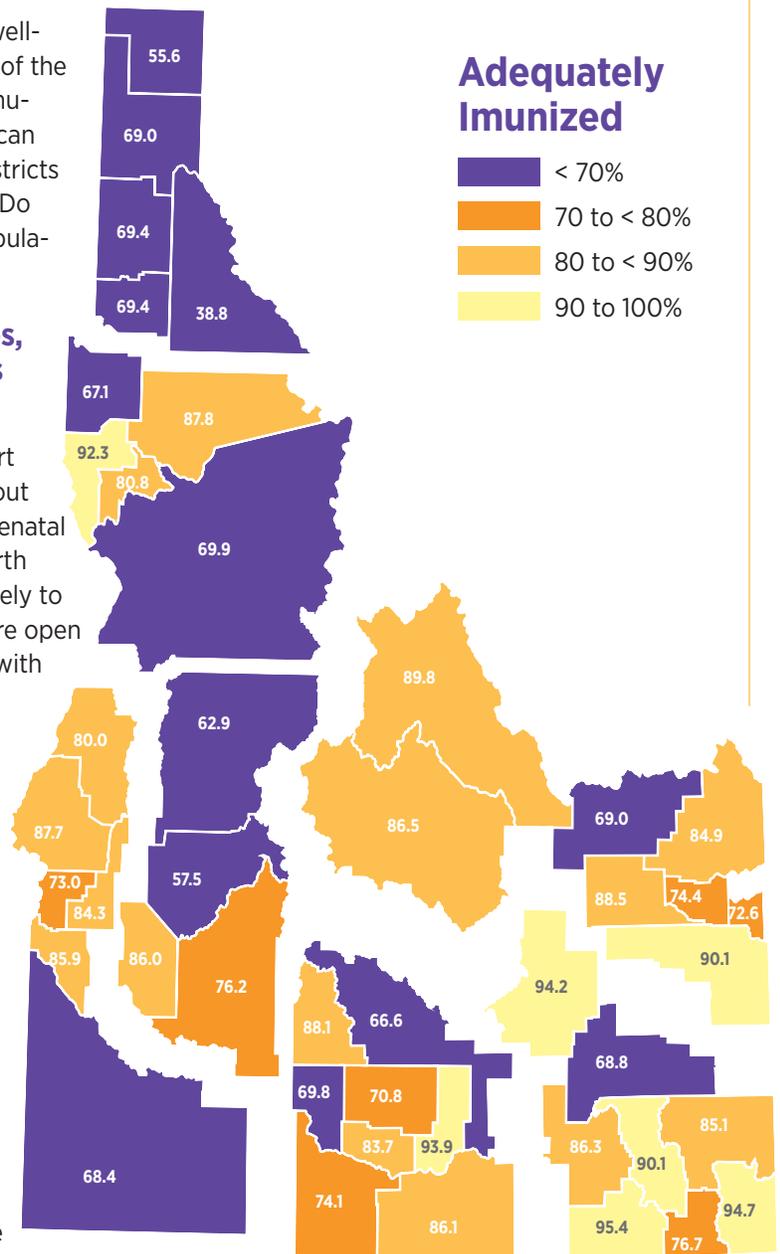
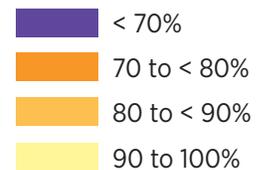
To prevent disease outbreaks, Idaho Code requires all students in preschool and grades K-12 attending a public, private or parochial school to meet minimum immunization requirements at the time of registration and before attending school (IDAPA 16.02.15). The Idaho Immunization Program collects an immunization report by November first each year from all Idaho schools with students enrolled in kindergarten, first, and/or seventh grade. Idaho's 2011-2012 school immunization rates are depicted in the map below.

To ensure the health and well-being of our schools, 90% of the youth need to be fully immunized. From the map, you can see many of our school districts fall short of the 90% goal. Do you know your patient population rate?

To improve these rates, there are many things we can do:

1. As a health provider, start the initial conversation about immunizations during a prenatal care visit or during childbirth classes. Parents are less likely to be sleep deprived and more open to learning. Provide them with information and links to well-respected websites, like CDC.gov.
2. Parents often cite stories they have heard about children being harmed by vaccines. Share with them information about the recent increases in pertussis, measles, and mumps in certain communities around the country. These outbreaks are the result of large segments of those communities not being vaccinated. Explain the potential outcomes of those diseases.
3. Don't let opportunities slip by to vaccinate.
4. Enroll in CDHD's free Birth Cohort reminder card project. Your patients will receive an age appropriate reminder postcard that immunizations are due.

Adequately Immunized



Meningococcal:

Who needs to be vaccinated?

Meningococcal disease is a serious, vaccine-preventable infection. The meningococcal conjugate vaccine is recommended for all 11–18 year olds. Kids should get this vaccine at 11–12 years of age and a booster dose at age 16. The effectiveness of the vaccine wanes over time, so it is also important for students heading to college to get a booster shot.

Meningococcal disease can be spread by close contact, (like coughing or kissing, for example) or by lengthy contact, especially if the students are living in a dorm setting. Many colleges require the booster dose before students start school, and the Advisory Committee on Immunization Practices (ACIP) suggests that children receive the vaccine less than 5 years before starting college.

There are two meningococcal vaccines available in the United States:

- Meningococcal polysaccharide vaccine (MPSV4)
- Meningococcal conjugate vaccine (MCV4)

Adolescents age 16 through 18 years can get the booster dose at any time. The minimum interval between doses is 8 weeks.

Teens, and even some adults, should get either the MPSV4 vaccine or the MCV4 vaccine if:

- They are a college freshmen living in a dormitory
- They are a military recruit
- They have a damaged spleen or if the spleen has been removed
- They have terminal complement deficiency
- They are a microbiologist who is routinely exposed to *Neisseria meningitidis* (the causal pathogen)
- They are traveling or residing in countries in which the disease is common.

For additional details, consult the Meningococcal Vaccine Information Statement: www.cdc.gov/vaccines/hcp/vis/vis-statements/mening.html

A Summary of Combination Vaccines

ACIP and CDC now recommend using combination vaccines over single antigen vaccines whenever appropriate. Combination vaccines have many benefits, including decreasing the number of injections per visit, but also creates a new set of usage indications for the vaccines. Here are some points to keep in mind:

- Use of the same brand in a series is preferred. However, vaccines that protect against the same disease may be administered interchangeably. The first three doses of Pertussis vaccine are the exception; interchangeability data is not available for this. The same manufacturer should be used when available for the first three doses of Pertussis vaccine.
- You may give a combination vaccine anytime at least one component is recommended and no other component is contraindicated.
- Extra doses of vaccine antigen are permissible for Hep B, Hib, MMR, IPV, Rv, and Varicella, but caution is advised for Tetanus containing vaccines due to possible hypersensitivity reactions with frequent administration.

Combination Vaccination Indications for use:

	AGE RANGE	DTaP	IPV	Hep B	HIB	MMR	Varicella
Pentacel	6 weeks through 4 years	✓	✓		✓		Primary series and 12–18 month booster
Pediarix	6 weeks through 6 years	✓	✓	✓			Primary series
Kinrix	4–6 years of age	✓	✓				Booster Dose (5th DTaP and 4th Polio)
Comvax	6 weeks to 15 months			✓	✓		Primary series
ProQuad	12 months to 12 years*					✓	✓ *higher risk of febrile seizures when given as first dose in 12–23 months of age

To read the full recommendations go to www.cdc.gov/mmwr/PDF/rr/rr4805.pdf



College Outreach for Meningitis Vaccine

Through grassroots efforts, 600 doses of the meningitis vaccine have been administered free to college students at LCSC, BSU, and BYU. The Idaho Immunization Coalition, Idaho Immunization Program, and Boise State University have worked together to initiate and coordinate campaigns at these college campuses to educate and vaccinate! Many volunteers from the Idaho Immunization Program, Novartis Pharmaceutical Company, Schools of Nursing, and campus health clinics have contributed time and effort to this cause. Thank You Everyone!

Here are the clinics being planned for the next few months:

University of Idaho

- Aug. 23, 2013 12:30 to 4 p.m.
- Sept. 4, 2013 12 to 4 p.m.
- Oct. 28, 2013 10 a.m. to 2 p.m.
- Oct. 29, 2013 10 a.m. to 2 p.m.

College of Idaho

- Sept. 19, 2013

BSU

- Aug. 28, 2013
- September & October - TBA

BYU

- May 23, 2013
- Two clinics to be scheduled in Summer/Fall — TBA

CSI (tentative)

- August 27, 2013
- August 29, 2013
- September 3, 2013
- September 5, 2013

LCSC

- August 5, 2013 (Athletic Vaccination Clinic) 9 a.m. to 2 p.m.
- August 23, 2013 (New Student Fall Orientation) 8:30 a.m. to 2 p.m.
- August 26, 2013 (Welcome Fair Booth) 9 a.m. to 2 p.m.

HPV Vaccine: Another Immunization Success Story



HPV (*Human Papillomavirus*) is the most common sexually transmitted infection in the United States. More than 6 million infections occur yearly and it is estimated that 50% of sexually active men and women will get HPV at some point in their lives. Of the more than 100 strains of virus, two strains, 16 and 18, are associated with 70% of the cervical cancer cases, as well as pharyngeal and anogenital cancers. Strains 6 and 11 are associated with anogenital warts.

Two vaccines have been available to help prevent contraction of these viral strains since 2006. Cervarix is targeted specifically for females and helps protect against HPV 16 and 18. Gardasil prevents infection from four strains: 6, 11, 16, and 18. It is available for both males and females. ACIP recommends the 3 dose vaccination

series begin at age 11 or 12, but can be given up to age 26. Both vaccines are most effective if started before the initiation of sexual activity.

Current research suggests the vaccine protection is long-lasting. Six years of follow-up data indicate the vaccines are still effective and there is no evidence of waning protection. In studies involving girls between the ages of 14–19, HPV prevalence has decreased from **56%** (2003–2006) to **5.1%** (2007–2010).

Rates of HPV infection can continue to fall if all adolescents are offered the vaccine by their health care provider. Both vaccines have been proven safe and studies have not found a link between vaccination and earlier sexual initiation.



Baby Steps

BabySteps is an incentive based education program for pregnant and parenting mothers and their families. Moms earn points by participating in educational classes and prenatal care, and for having healthy behaviors for themselves and their babies. Points are redeemed following class for baby care items in the BabySteps Boutique, including diapers, clothing and baby furnishings.

Women who meet the following criteria are eligible to enroll:

- pregnant and receiving prenatal care
- Ada County resident
- And limited income (185% poverty)

Women can receive a referral from their physician, WIC, Early Head Start, or caseworkers. For more information, please see visit this website:

www.babystepsidaho.org

Written by Diane Bawcom, LMSW, Program Director BabySteps at St. Michaels Cathedral



Stay in Touch with CDHD Electronically

Nearly 94% of all adults use some kind of electronic communication. The most common form is email. According to research by the Pew Internet Civic Engagement Tracking Survey, about 70% of adults use some kind of social media. And nearly all young people, those 18-29, use social media (92%).

Newsletters like this one are great ways for us to communicate with the public, but we also realize that there is great potential to extend our reach through email and social media. That's why CDHD has contracted with GovDelivery to provide the public with additional ways of learning what's going on at your local health department.

On the front page of our website, cdhd.idaho.gov, you will find a navigation bar that will allow you to connect with and follow what CDHD is doing online. Click on "Sign up for CDHD Updates" and you will be taken to a page where you can enter your email address and choose the topics on which you would like to get updates. Other links from the navigation bar will take you to the CDHD Twitter and Facebook pages.



 [Sign up for CDHD Updates](#)

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 [Pay Online Now](#)

Join our online discussion of topics related to your health and that of the community. We'll even tell you when there's a new edition of this newsletter.



Idaho Immunization Summit 2013

The Idaho Immunization Coalition's 2013 Summit will spotlight the power of partnership to promote immunization. Let's come together to protect our communities from vaccine-preventable disease.

Monday, Sept. 30, 2013
8:30 a.m.- 3:30 p.m.
St. Luke's Boise Medical Center,
Anderson Center, Ada Room

*Will also be streamed live via the web;
more details to come.*

Featured Speakers:

- William Atkinson, MD, MPH
- Anna Dragsbaek, JD
- Jeanie Prince, MD

Registration

Space is limited, so sign up today. Log on to www.idahoimmune.org/summit to reserve your place. Registration is free, and includes lunch. Contact Karen Sharpnack, kjs@idahoimmune.org, with questions.

Sign up for the Birth Cohort Project

The Birth Cohort Project is a free tool made available to providers by CDHD to remind parents when their children need vaccinations. CDHD will send postcards to parents on a regular schedule when their children are due for vaccinations.

The reminder cards are sent to the parents of children in five different age groups: 2, 4, 6, 12, and 18 months.

If you would like CDHD to provide this free service to your office, contact Leanna Davis at 208-327-8548.



Use the Shot Line: 321-BABY (2229)

Shot Line is a resource available to YOU. Medical Providers, School Nurses, Child-care Providers and even private citizens can call and ask questions about immunizations and get answers from a live immunizations nurse. We strive to answer calls in a timely manner and with correct answers.

Be aware! There have been several calls concerning children receiving Kinrix for doses at 2, 4, 6, and 12-18 months. While the doses can be counted as valid this is considered to be a medical error. A VAERS form needs to be submitted as well as following the incident procedure policy for your office. Remember, Kinrix is only licensed to be given for the fourth dose of Polio and fifth dose of DTaP.

Question: We have a child who is behind on his vaccines. It's only been 26 days since his last MMR. Can we give him a second dose today?

Answer: No, there is no grace period for live virus vaccines. Minimum interval is 28 days.

Question: We have a 15-year-old who received MMR earlier today. Now she wants her second Varicella. Is it okay to give it? How about Hepatitis A?

Answer: As long as she gets her Varicella today everything is fine, if not she will need to wait 28 days. There is no waiting period between MMR and Hepatitis A.



Even though we try to provide accurate answers to the questions coming in there are those occasions when it becomes necessary to eat humble pie.

In May we answered a call concerning two children, ages seven and 10 years of age, who had never had MMR and Varicella.

Question: Can these children receive Proquad?

Answer: We recommended they receive single antigens for their first doses, because of the possibility of febrile seizures.

Corrected Answer: We have since learned that the recommendation for the single antigen first dose applies only through 48 months. From 48 months through 12 years of age, Proquad is fine to use for the first dose. However, there is no problem with using single antigens.

Provider Resources

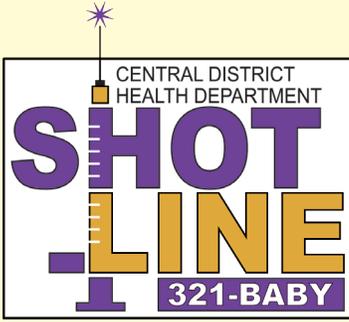
We often get questions from providers about where they can send their patients for additional information on vaccines. Below are a few useful links.

For parents: Vaccines for your children
www.cdc.gov/vaccines/parents/index.html

Evaluating Information on the Web
www.cdc.gov/vaccines/vac-gen/evalwebs.htm

By vaccine: materials for patients
www.cdc.gov/vaccines/vpd-vac/vaccines-list.htm

Materials from CHPVEC (The Children's Hospital of Philadelphia Vaccine Education Center)
www.chop.edu/service/vaccine-education-center/order-educational-materials/



Central District Health Department

Immunizations
707 N. Armstrong Pl.
Boise, ID 83704-0825

Address Service Requested



Immunizations Simplified:

A Toolkit for Childcare Providers

We would like to offer a big thank you to all who participated in the Childcare Survey that was mailed out this past spring. Out of 550 surveys mailed, 153 were returned. We used what we learned from the survey to create a new Childcare Provider class to bring you up to speed on the immunizations requirements of the State of Idaho.

Immunizations Simplified: A Toolkit for Childcare Providers, is designed to increase your understanding of immunizations requirements and provide practical methods for meeting those requirements. You'll learn about forms and how to use them, and how IRIS can streamline and simplify your record keeping. There will be plenty of time for hands-on practice too.

- The class is free, but **registration is required**.
- Idaho Stars Class Credit - 2 hours.
- Class size limited to 24 participants each session.

For more information and to register call Sharon Brown at 208-327-8585 or Charmaine Stappler at 208-327-8625.



Immunizations Simplified Class Schedule

All Classes run from 6:00–8:00 p.m.
At CDHD, 707 N Armstrong Place, Boise

Class Date	Registration Deadline
Sept. 18, 2013	Sept. 16, 2013
Oct. 1, 2013	Sept. 27, 2013