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THE SHARPSHOOTER

A Publication for Local Health Departments & TVFC Providers serving Health Service Regions 2 & 3

AUGUST IS NATIONAL IMMUNIZATION AWARENESS MONTH

The goal of National Immunization Awareness Month is to increase awareness about immunizations across the life span, from infants to the elderly August is the perfect time to remind family, friends, co-workers, and those in the community to catch up on their vaccinations. Parents are enrolling their children in school, students are entering college, and healthcare workers are preparing for the upcoming flu season.

Vaccinations have been one of the greatest public health achievements of the 20th century. Vaccine use has eradicated smallpox as well as wild poliovirus in the United States and significantly reduced the number of cases of measles, diphtheria, rubella, pertussis and other diseases. But despite these efforts, today tens of thousands of people in the United States still die from these and other vaccine-preventable diseases.

Recommended vaccinations begin soon after birth and continue throughout life. Being aware of the vaccines that are recommended for infants, children, adolescents, adults of all ages and seniors, and making sure that we receive these immunizations, are critical to protecting ourselves and our communities from disease.

Because children are particularly vulnerable to infection, most vaccines are given during the first five to six years of life. Other immunizations are recommended during adolescent or adult years and, for certain vaccines, booster immunization are recommended throughout life. Vaccines against certain diseases that may be encountered when traveling outside of the United States are recommended for travelers to specific regions of the world.



For additional information, please visit: <http://www.cdc.gov>.

PROTECTION AGAINST HEPATITIS B WHEN USING PENTACEL VACCINE DURING THE HIB VACCINE SHORTAGE

Centers for Disease Control and Prevention (CDC) has posted a new document to provide guidance about completing the hepatitis B vaccine series in settings where Pentacel (DTaP-IPV/Hib) is being used for the primary Hib series during the Hib vaccine shortage.

Providers using Pentacel vaccine to protect infants against Hib disease need to make every effort to have an adequate supply of monovalent hepatitis B vaccine available to ensure all infants receive timely hepatitis B vaccination and avoid excess doses of other antigens such as DTaP. This new document summarizes the best strategies for vaccination when using Pentacel, taking into account the infant's mother's hepatitis B surface antigen status and vaccine availability.

To access the entire document, go to:

www.cdc.gov/vaccines/vac-gen/shortages/downloads/eo-hib-hepb-cov.pdf

In this Issue...

- Page 2 Changes in Texas Immunization Requirements.
- Page 3 Attention all TVFC Providers.
 - Vaccine Refrigeration
 - First Responders.
 - Protection from H1N1 Flu Virus.
- Page 4 VIS Updates.



2009-2010 CHANGES IN TEXAS IMMUNIZATION REQUIREMENTS

On March 5, 2009, the Executive Commissioner on Health and Human Services approved several revisions to the “Immunization Requirements for Children and Students in Texas Public and Private Schools: [Title 25, Health Services, Chapter 97, Texas Administrative Code (TAC) 97.61 and 97.63-97.77].

The changes to the requirements were made in order to update the Texas elementary and secondary school immunization requirements so that they adhere more closely to the recommendations of the Centers for Disease Control and Prevention (CDC) and the Advisory Committee on Immunization Practices (ACIP). These changes include:

Hepatitis A Vaccine: Beginning August 1, 2009, all students entering kindergarten, statewide, will be required to have 2 doses of measles, mumps, and rubella (MMR) vaccine.

MMR Vaccine: Beginning August 1, 2009, all students entering kindergarten will be required to have two doses of measles, mumps, and rubella (MMR) vaccine.

Varicella Vaccine: Beginning August 1, 2009, all students entering kindergarten and 7th grade will be required to have 2 doses of Varicella vaccine. A written statement from a parent (or legal guardian or managing conservator), school nurse, or physician attesting to a child’s positive history of Varicella disease (chickenpox), or of Varicella immunity, is acceptable in lieu of either dose of Varicella vaccine.

Tdap Vaccine: Beginning August 1, 2009, all students entering the seventh grade will be required to have one dose of Tdap vaccine. Students in the seventh grade will be required to have a booster dose of Tdap only if it has been five years since their last dose of a tetanus-containing vaccine. Students in grades 8-12 are required to have a booster dose of Tdap if it has been ten years since their previous dose of a tetanus-containing vaccine. TD is acceptable in lieu of Tdap if a contraindication to pertussis exists.

Meningococcal Vaccine: Beginning August 1, 2009, all students entering the seventh grade will be required to have one dose of meningococcal vaccine.

Source:

www.dshs.state.tx.us/immunize/rulechange.shtm

ATTENTION ALL TVFC PROVIDERS

Influenza vaccine expires on June 30, 2009, and should be removed from your refrigerator after that date. All expired Influenza vaccines require a completed vaccine loss report (VLR) signed by the physician listed on the VFC enrollment. Please ensure the vaccine NDC number section of the VLR is also completed before submission. Document the expired doses in column F on the C-33 form.

Expired influenza vaccine must be returned to McKesson Distributors in the prepaid McKesson box only. The prepaid UPS label should be apparent once the top box flaps are reversed. A copy of the VLR should be included with the expired vaccine and the original attached when submitting the monthly report.

For questions, please call your Local Health Department or Cindy Grier, Vaccine Coordinator, HSR 2/3 at 817-264-4793.

VACCINE REFRIGERATION

The Texas summer is upon us and we should be aware that the heat can play havoc with refrigeration. Refrigerator temperature should be maintained between 36°F to 46°F (2°C to 8°C). For vaccines that require freezing the freezer temperature should be maintained at +5°F (-15°C) or colder. Check the temperature of the refrigerator and freezer early in the morning and late in the afternoon to assure that the power is on, the refrigerator is on, the door is not ajar, and that everything is in good working condition.

This is especially important on Friday afternoon, before the weekend.

Source: Texas Department of State Health Services.



FIRST RESPONDERS – FAMILY MEMBERS PARTICIPATE IN THE TEXAS IMMUNIZATION REGISTRY

In an effort to safeguard Texas' first responders and their immediate family members from potentially harmful, preventable diseases and disaster related illnesses, the Texas Legislature passed legislation allowing adult first responders and their immediate family members to participate in ImmTrac, the Texas Immunization Registry. ImmTrac is a free service provided by the Texas Department of State Health Services (DSHS). It is a confidential, secure electronic system that stores and consolidates immunization information. ImmTrac participants must give consent in writing to have their immunization information added to ImmTrac. Adult participants may remain in ImmTrac for a lifetime. Individuals may submit a written request to withdraw from the registry at any time.

The term "first responder" refers to peace officers, fire protection personnel, volunteer firefighters, and emergency medical services personnel whose duties include responding rapidly to an emergency. Persons in these professions may request inclusion of their immunization information in ImmTrac. "Immediate family member" is defined as a parent, spouse, child or sibling of a first responder who resides in the same household as the first responder. These individuals may also request inclusion of their immunization information in ImmTrac.

To register for ImmTrac, first responders are now able to request their immunization information be included in the Registry through their health-care provider or their local health department. The service is free of charge and only health-care providers legally authorized to administer vaccines have access to immunization data of first responders. To register for participation, first responders and their adult family members must grant consent by: completing, signing and delivering a First Responder/Family Member consent form to the local health department or to a health-care provider authorized to access ImmTrac, along with copies of immunization records. First Responder/Family Member consent forms can be accessed on line at: www.Immtrac.com

If you are a provider of immunizations and would like to participate in ImmTrac, please contact the Department of State Health Services at 1-800-252-9152, or e-mail Immtrac@dshs.state.tx.us

NATIONAL CAMPAIGN TO PROTECT FAMILIES FROM H1N1 FLU VIRUS

New Public Service Announcement Campaign Unveiled at the Health and Human Services

Health and Human Services Secretary Kathleen Sebellus announced that the Department of Health and Human Services (HHS) is joining the Ad Council and Sesame Workshop, the nonprofit educational organization behind Sesame Street, to launch a national public health service advertising campaign designed to encourage American families and children to take steps to protect themselves from the 2009 H1N1 flu virus and continue to practice healthy habits. As part of HHS and the Ad Council's campaign, Sesame Workshop produced a television public service announcement (PSA) featuring Sesame Street's Elmo and Gordon explaining the importance of healthy habits such as washing your hands, avoid touching your eyes, nose and mouth and sneezing into the bend of your arm.

The 2009 H1N1 flu virus is a new flu virus of swine origin that was first detected in April 2009. The virus is spreading from person-to-person, sparking a growing outbreak of illness in the United States and internationally. Experts believe that the 2009 H1N1 flu spreads in the same way that seasonal influenza viruses spread – primarily through the coughs and sneezes of people who are sick with the virus.

The new PSA campaign focuses on the importance of providing parents, teachers and children with accurate information about how to practice healthy habits, highlighting proper hand-washing and simple everyday actions that lead to staying healthy and keeping germs away. Created by Sesame Workshop, the television PSA's encourage audiences to visit www.cdc.gov to get more information on how to stay healthy. The PSA's are an extension of Sesame's *Healthy Habits for Life* initiative, which helps young children and their caregivers establish an early foundation of healthy habits. For additional campaign information, visit: www.hhs.gov.

VACCINES AND IMMUNIZATIONS EDUCATIONAL OPPORTUNITIES

Upcoming Live Satellite Immunization Training Broadcast

Immunization Update 2009

July 30, 2009
9:00am – 11:00am
1301 S. Bowen Rd., Ste 200
Arlington, TX 76013
Room 2208



Content Overview:

The Immunization Update is an annual presentation by the Centers for Disease Control and Prevention (CDC) that highlights current and late-breaking immunization issues. Anticipated topics include influenza (including H1N1 influenza), rotavirus, vaccine safety and vaccine supply. So-called “alternative vaccine schedules and other emerging vaccine issues will also be discussed.

To RSVP, please e-mail Candyce Basham at Candyce.basham@dshs.state.tx.us or call (817) 264-4896. Please provide **name, title, department/organization, e-mail address and phone number** of those attending.

Self Study

Immunization: You Call the Shots

Description:

This web-based course is an interactive, self study program consisting of a series of modules covering all aspects of immunization. The module provides basic vaccine content, links to resource materials, a comprehensive glossary, and self-tests to assess learning.

Audience:

Practicing nurses and nursing students, medical assistants, pharmacists, and other health professionals who provide immunizations. The course is designed for immunization providers who are new to immunization or for those who need a refresher

Teaching Immunization Delivery and Evaluation (TIDE)

Description:

A curriculum to improve knowledge, attitudes and skills that are likely to change provider behavior in clinical settings, leading to increased immunization rates for children. Clinical scenarios are used to trigger problem solving and discussion. The scenarios are organized as four self-contained modules. Each module covers a different aspect of immunization delivery.

Audience:

Immunization Providers (Physicians, Nurses, Nurse Practitioners, Pharmacists, Physician’s Assistants, Medical Students, etc).

To register for these or other self study programs visit: <http://www.cdc.gov/vaccines/ed/self-study.htm>

Current Vaccine Information Statement (VIS) Dates

DTaP/DT/DTP	05/17/2007
Hepatitis A	03/21/2006
Hepatitis B	07/18/2007
Hib	12/16/1998
HPV	02/02/2007
Influenza (LAIV)	07/24/2008
Influenza (TIV)	07/24/2008
Meningococcal	01/28/2008
MMR	03/13/2008
Multi-vaccine	09/18/2008 *
PCV7	12/09/2008
PPSV	04/16/2009
Polio	01/01/2000
Rotavirus	08/28/2008
Td/Tdap	11/18/2008
Varicella	03/13/2008

* This VIS is an optional alternative when two or more routine childhood vaccines (i.e. DTaP, hepatitis B, Hib, pneumococcal, polio, or rotavirus) are administered at the same visit.

VIS updates are available in English and more than 30 languages. To view the website, visit:
<http://www.partnersforimmunization.org>.

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Please direct your immunization questions to your Health Services Region Immunization Staff

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