

# THE SHARPSHOOTER November 2012

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

## 2011 NATIONAL IMMUNIZATION SURVEY RESULTS

The National Immunization Survey (NIS) is conducted annually by the Centers for Disease Control and Prevention (CDC) to assess immunization levels among pre-school children, 19 - 35 months of age. According to the CDC, results of the 2011 NIS indicate that vaccination coverage among these children remained stable or increased compared with 2010 for all recommended vaccines. Coverage continued to meet or exceed national *Healthy People 2020* objectives of 90% for MMR, HepB, poliovirus, and varicella vaccine. Coverage with the full series of Hib increased 13.6 percentage points compared with 2010. This increase likely reflects a recovery from the effect of the recommendation to defer the booster Hib dose during the Hib shortage that occurred during December 2007-June 2009.

Coverage continued to increase for the more recently recommended vaccinations, including HepA and rotavirus, and the birth dose of HepB. PCV reached coverage levels comparable to those for DTaP, a vaccine that also requires 4 doses but with longer-standing recommendations. Although coverage did not yet reach the *Healthy People 2020* objectives for these vaccines, the reduction in disease already has been substantial.

Challenges remain, with the biggest continuing to be for families to understand the importance of children receiving all doses in each vaccine series. The Department of State Health Services (DSHS) along with healthcare providers can assist parents in ensuring that children are appropriately vaccinated by accessing data in ImmTrac at each visit, educating parents on the importance of immunization, utilizing a reminder/recall system, and working with local public and private collaborations to improve immunization coverage.

For additional survey information, please see the full article at: <http://www.cdc.gov/mmwr/pdf/wk/mm6135.pdf>.

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## Department of State Health Services Pharmacy Memo

The following is a September 27, 2012 memo from Bo Shifflett, R.Ph. Consultant Pharmacist, Pharmacy Division.

### Question on Prefilling Syringes

I have received calls from clinics asking about drawing up doses of vaccines in syringes before they are actually needed. The most common question is how long the vaccine is viable once it has been prefilled in a syringe. Also, how long is the vaccine viable when a needle is attached when using a manufacturer's prefilled syringe. According to the CDC, they strongly discourage filling syringes in advance because of the increased risk for administration errors. Once in the syringes it is difficult to tell which vaccine is which. Other problems associated with this practice are waste and possible bacterial growth in vaccines that do not contain a preservative. Medication administration guidelines state that individuals should draw up and prepare any medications that they will administer. Syringes not filled by the manufacturer are designed for immediate administration not vaccine storage. However, if you have a reason to draw up more than one dose at a time for a large flu clinic, you should only prefill a few syringes at a time. While you are administering the vaccines that you drew up, someone else can be prefilling a few syringes that they will administer. **Any prefilled syringe, other than those filled by the manufacturer that are not used by the end of the day, should be discarded.** When using manufacturer prefilled syringes, they do not have a needle already attached. It is recommended that you wait until you are ready to administer the vaccine before attaching a needle, because when the needle is attached, the sterile seal is broken. **Any manufacturer's prefilled syringe that has the sterile seal broken should be used by the end of the day or discarded.**

### NATIONAL INFLUENZA VACCINATION WEEK

The Centers for Disease control and Prevention (CDC) has announced the designation of the second week in December 2012 as the National Influenza Immunization Week (NIVW). This year, National Vaccination Week will run from December 2<sup>nd</sup> to December 8<sup>th</sup>. This event was established to highlight the importance of continuing influenza (flu) vaccination, as well as fostering greater use of flu vaccine after the holiday season and into January and beyond. CDC is recommending that people take this opportunity to be vaccinated and it is hopeful that vaccine providers will use this time to enhance flu vaccine by scheduling additional clinics; extending clinic hours; and enabling a larger role for mass vaccination at places such as retail locations. Routine influenza is recommended for all persons aged 6 months and older unless contraindicated. This is supported by evidence that annual influenza vaccination is safe and effective preventative health action with potential benefit in all age groups.

As in previous recommendations, all children 6 months – 8 years who receive a seasonal influenza vaccine for the first time should receive 2 doses. Children who received only 1 dose of the seasonal influenza vaccine in the first influenza season that they received vaccine should receive 2 doses. Children aged 6 months – 8 years for whom the previous 2011-2012 seasonal vaccine history cannot be determined should receive 2 doses of a 2012-13 seasonal influenza vaccine. Children 9 years and older should receive only one dose of the influenza vaccine per year regardless of the number of doses in previous years.

CDC recommends a three-step approach to protect against the flu:

1. Take time to get the flu vaccine.
2. Take everyday preventative actions to stop the spread of germs (*including frequent hand washing and staying home when sick*).
3. Take flu antiviral drugs when your doctor prescribes them.

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

## **Preventing Perinatal Hepatitis B Transmission**

The Immunization Action Coalition (IAC) recently updated seven educational materials related to perinatal hepatitis B prevention. Revisions include updated statistics and resources, title changes, and other minor edits. The seven pieces are:

1. Guidance for Developing Admission Orders in Labor & Delivery and Newborn Units to Prevent Hepatitis B Virus Transmission
2. Sample Text for Developing Admission Orders in Newborn Units for the Hepatitis B Vaccine Birth Dose
3. Give the Birth Dose... Hepatitis B vaccine at birth saves lives!
4. States Report Hundreds of Medical Errors in Perinatal Hepatitis B Prevention
5. Medical Errors Put infants at Risk for Chronic Hepatitis B Virus Infection – Six Case Reports
6. Unprotected Infant Dies of Fulminant Hepatitis B
7. Two More Infants chronically Infected with Hepatitis B Virus... the Medical Errors continue

IAC's Handouts for Patients and Staff web section offers healthcare professionals and the public more than 250 FREE English-language handouts (many also available in translation). IAC website users are encouraged to print out, copy, and distribute widely.

To access this information, click the following link: <http://www.immunize.org/express/issue1017.asp>



There are 6.85 million children registered with ImmTrac and 2,325,449 of these children are under 6 years of age. Many of their ImmTrac records are incomplete or missing data. Although Texas law states that ALL healthcare providers are required to report to ImmTrac ALL vaccines administered to children less than 18 years of age, many providers are still not reporting. Therefore, state and local health department employees are contacting parents and providers in the statewide effort to identify, locate, and document missing immunizations. The goal of this project which began in 2007 is to bring Texas children between the ages of 19-35 months up to date with their immunizations. Assuring that a child's immunization record is up to date in ImmTrac creates a more accurate and complete registry benefiting all ImmTrac users. If you have questions about ImmTrac please call the local health department in your county or our office in Arlington at 817-264-4811.

### **Flu Vaccination Locator**

Looking for a provider with a supply of influenza vaccine close to home? Just go to <http://www.flu.gov/>, enter your zip code (or city and state) and watch the list of providers pop up.

## **EVENTS, MEETINGS and RESOURCES**

**World Pneumonia Day** is November 12, 2012. The day will mobilize efforts to fight a neglected disease that kills more than two million children younger than the age of five worldwide each year. For additional information, please visit: <http://worldpneumoniaday.org/>.

**The Centers for Disease Control and Prevention (CDC) and Medscape** have collaborated to deliver CDC's authoritative guidance directly to Medscape's physicians, nurses, pharmacists, and other healthcare professionals. Experts from the CDC offer video commentaries on current topics important to practicing clinicians. The National Center for Immunization & Respiratory Diseases (NCIRD) has contributed commentaries on Tdap, pertussis, meningococcal disease, seasonal influenza/vaccines, and pneumococcal disease/PCV13. Please visit the **Medscape** web at: <http://www.medscape.org>.

**Texas Vaccine Education Online** is produced by the Immunization Branch of the Texas Department of State Health Services and provides short online courses on topics related to vaccines, including Texas Vaccines for children (TVFC), ImmTrac, vaccine-preventable diseases, vaccine administration, and strategies to raise immunization coverage levels. The courses are free and can be accessed by going to: <http://www.vaccineeducationonline.org/>.

### **TEXAS STATE HEALTH DEPARTMENT ISSUES PERTUSSIS ADVISORY – September, 2012**

Citing six deaths and more than 1,000 confirmed cases of pertussis, or whooping cough, in Texas so far this year, the Texas Department of State Health Services is issuing a health advisory urging immunization against the potentially lethal illness. The six deaths so far this year are the most for a single year since 2005. There were 961 total Texas cases of pertussis last year, down from a peak of 3,358 in 2009.

Five of the deaths were among infants under two months old, the age at which the first pertussis vaccination is recommended. This underscores how important it is for parents and others around newborns to make sure they have received the recommended doses of vaccine. The sixth death was of an unvaccinated older child with underlying medical conditions.

Pertussis is a very contagious bacterial illness usually spread by coughing or sneezing. It often starts with cold-like symptoms and a mild cough. After a week or two, severe coughing can begin. The symptoms are usually milder in teens and adults but can be life threatening for young children because of the risks of apnea, a pause in breathing.

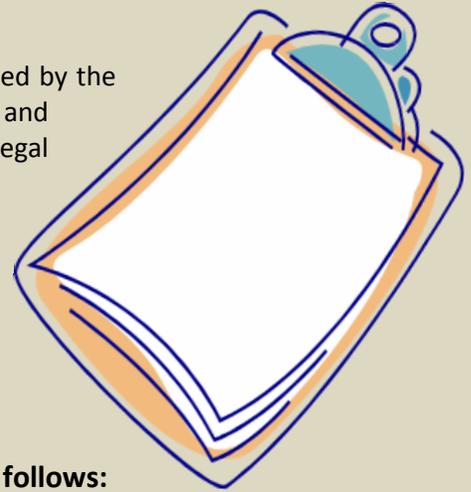
To protect babies, the U.S. Centers for Disease Control and Prevention and DSHS recommend pregnant women get a pertussis vaccine any time after 20 weeks gestation. Others who will be around infants should also get a shot: fathers, older siblings, other caregivers and health care professionals like doctors and nurses who care for babies.

Doctors who suspect pertussis should report the case to their local health department as soon as possible to help stop the disease from spreading. Patients who have pertussis should not go back to work or school until they've had five days of antibiotic treatment.

The complete health advisory, including recommendations for vaccination for all ages, is available at [www.dshs.state.tx.us/news/releases/PertussisAdvisory-090612.pdf](http://www.dshs.state.tx.us/news/releases/PertussisAdvisory-090612.pdf).

## VACCINE INFORMATION STATEMENTS

Vaccine Information Statements (VISs) are information sheets produced by the Centers for Disease Prevention (CDC). VISs explain both the benefits and risks of a vaccine to adult vaccine recipients and the parents or legal representatives of children and adolescents. Before a National Childhood Vaccine Injury Act-covered vaccine is administered to anyone (this includes adults!), a copy of the most current VIS for the vaccine must be given.



**As of 11/16/2012, the most recent versions of the VISs are as follows:**

DTaP/DT	05/17/07	MMR	04/20/12
Hepatitis A	10/25/11	MMRV	05/21/10
Hepatitis B	02/02/12	PCV13	04/16/10
Hib	12/16/98	PPSV	10/06/09
HPV Cervarix	05/03/11	Polio	11/08/11
HPV Gardasil	02/22/12	Rotavirus	12/06/10
Influenza (LAIV)	07/02/12	Shingles	10/06/09
Influenza (TIV)	07/02/12	Td/Tdap	01/24/12
Meningococcal	10/14/11	Varicella	03/13/08

\*Multi-vaccine VIS 11/16/12 **“New”**

\*(For 6 vaccines given to infants/children: DTaP, IVP, Hib, HepB, PCV, RV)

**Check your VIS against this list.**

If you have outdated VISs, click on the following link to get current versions:

<http://www.immunize.org/vis/>.



**HEALTH SERVICE REGION 2/3 ARLINGTON IMMUNIZATION CONTACTS**

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