



**TEXAS**  
Health and Human  
Services

**Texas Department of State  
Health Services**

RE: Maintaining Clinical Preventive Services, Including Immunizations,  
During the COVID-19 Pandemic

April 8, 2020

The COVID-19 pandemic is changing rapidly and continues to affect communities across the United States differently. Clinicians must maintain access to clinical services in environments that are safe for all. Some of the strategies used to slow the spread of disease in communities include postponing or cancelling non-urgent elective procedures and using telemedicine instead of face-to-face encounters for routine medical encounters.

The Texas Department of State Health Services' Immunization Unit encourages healthcare providers to continue vaccinating patients, especially infants and older adults, who are at highest risk of getting diseases that vaccines can prevent. Slowing or stopping access to immunizations increases our risk to outbreaks of other diseases.

Below are updated recommendations from the Centers for Disease Control and Prevention (CDC).

**Clinics working with children:**

Healthcare providers in communities affected by COVID-19 are using strategies to separate well visits from sick. Examples include:

- Scheduling well visits in the morning and sick visits in the afternoon.
- Separating patients spatially, such as by placing patients with sick visits in different areas of the clinic or another location from patients with well visits.

- Collaborating with providers in the community to identify separate locations for holding well visits for children.

Due to personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well-child visits, including provision of immunizations, for all patients in their practice. If a practice can provide only limited well-child visits, healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible.

For more information on pediatric recommendations, visit:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/pediatric-hcp.html>

### **Clinics working with adults:**

Delivery of some clinical preventive services for adults, such as immunizations, requires face-to-face encounters, and, in areas with community transmission of COVID-19, these should be postponed except when:

- An in-person visit must be scheduled for some other purpose, and the clinical preventive service can be delivered during that visit with no additional risk; or
- An individual patient and their clinician believe that there is a compelling need to receive the service based on an assessment that the potential benefit outweighs the risk of exposure to the virus that causes COVID-19.

For more information on adult recommendations, visit:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/preparedness-checklists.html>

### **Flu:**

While flu season is winding down, we continue to see flu viruses in circulation. Recommendations for late-season flu vaccination that may be helpful in combination with the CDC COVID-19 guidance include:

- Providers should continue vaccinating patients throughout the influenza season, including into the spring months (for example, through May).

- A good late season use of vaccine is for children younger than age 9 years who needed 2 doses of vaccine but failed to get their second dose.
- Vaccines can be given through the month of June since most injectable influenza vaccine has a June 30 expiration date.

CDC continues to monitor the impact of COVID-19 and will provide updates as they become available.

Thank you,

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