

Immunize NY!

Bureau of Immunization

Welcome to *Immunize NY!*

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Frequently Used Abbreviations:

AAP:	American Academy of Pediatrics
ACIP:	Advisory Committee on Immunization Practices
CDC:	U.S. Centers for Disease Control and Prevention
FDA:	U.S. Food and Drug Administration
IAC:	Immunization Action Coalition
MMWR:	Morbidity and Mortality Weekly Report
NYSDOH:	New York State Department of Health
NYSIIS:	New York State Immunization Information System

New Recommendation from the February 2012 ACIP Meeting

ACIP voted to extend the age for vaccination with Tdap vaccine to include adults ages 65 years and older. Previously, the one-time routine dose of Tdap was recommended for people ages 11 through 64 years. To learn more about this recommendation visit:

<http://www.cdc.gov/vaccines/recs/provisional/Tdap-feb2012.htm>

Recently Published ACIP Recommendations

1. Use of Quadrivalent Human Papillomavirus (HPV) Vaccine in Males

On October 25, 2011, ACIP recommended routine use of quadrivalent HPV vaccine (HPV4: Gardasil, Merck & Co. Inc.) in:

- Males ages 11 or 12 years,
- Males ages 13 through 21 years who have not been vaccinated previously or who have not completed the 3-dose series,
- Males ages 22 through 26 years.

In making these new recommendations, ACIP considered information on vaccine efficacy (including data available since October 2009 on prevention of grade 2 or 3 anal intraepithelial neoplasia [AIN2/3], a precursor of anal cancer); vaccine safety; estimates of disease and cancer resulting from HPV; cost-effectiveness; and programmatic considerations.

To read the published report, **Recommendations on the Use of Quadrivalent Human Papillomavirus Vaccine in Males – Advisory Committee on Immunization Practices (ACIP), 2011**, visit: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6050a3.htm?s_cid=mm6050a3_e

2. Use of Hepatitis B Vaccine in Adults with Diabetes Mellitus

On October 25, 2011 ACIP recommended that all previously unvaccinated adults ages 19 through 59 years with diabetes mellitus (type 1 and type 2) be vaccinated against hepatitis B

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as soon as possible after a diagnosis of diabetes is made. According to ACIP, data on the risk for hepatitis B among adults ages 60 years or older is not as strong. However, ACIP recommended that unvaccinated adults ages 60 years or older with diabetes may be vaccinated at the discretion of the treating clinician.

To read the published report, **Use of Hepatitis B Vaccination for Adults with Diabetes Mellitus: Recommendations of the Advisory Committee on Immunization Practices (ACIP)**, visit: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6050a4.htm?s_cid=mm6050a4_e.

2012 Immunization Schedules Published

The ACIP approved adult and childhood immunization schedules for 2012 were published in recent editions of the MMWR. Along with ACIP, the adult schedule has been approved by the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, the American College of Physicians, and the American College of Nurse-Midwives. The childhood schedules (ages 0 through 6 years and 7 through 18 years) have also been approved by the American Academy of Pediatrics, and the American Academy of Family Physicians.

To view the published adult schedule, **Recommended Adult Immunization Schedule – United States, 2012**, visit: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6104a9.htm?s_cid=mm6104a9_e.

To view the published childhood schedules, **Recommended Immunization Schedules for Persons Aged 0 through 18 Years – United States, 2012**, visit: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6105a5.htm?s_cid=mm6105a5_e.

An erratum was issued by the MMWR on March 2, 2012 for the 2012 childhood and adolescent schedules. On page 2 of the original article, the second bulleted text in the first footnote regarding hepatitis B vaccination should read: "For infants born to hepatitis B surface antigen (HBsAg)–positive mothers, administer HepB vaccine and 0.5 ml of hepatitis B immune globulin (HBIG) within 12 hours of birth. These infants should be tested for HBsAg and antibody to HBsAg (anti-HBs) **1 to 2 months after completion of at least 3 doses of the HepB series, at age 9 through 18 months (generally at the next well-child visit).**"

To view this erratum visit: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6108a5.htm>.

For adult vaccination schedule information, changes, downloads, and health care provider tools visit: <http://www.cdc.gov/vaccines/recs/schedules/adult-schedule.htm>.

For childhood vaccination schedule information, changes, downloads, and health care provider tools visit: <http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm>.

Did you know?

The prophylactic use of acetaminophen or other analgesics before or at the time of vaccination is NOT recommended. Evidence has shown that infants who received 3 doses of acetaminophen had reduced immune responses to certain vaccines. Acetaminophen can be used to treat pain or fever if it should occur following vaccination. To read the full **General Recommendations on Immunization, Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2011** go to: http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6002a1.htm?s_cid=rr6002a1_e.

FDA Approves Prevnar 13 for Those Ages 50 and Older

On December 30, 2011, the FDA announced its approval of the pneumococcal 13-valent conjugate vaccine (Prevnar 13, Wyeth Pharmaceuticals) to prevent pneumonia and invasive disease caused by the bacterium *Streptococcus pneumoniae* in people ages 50 and older. Prevnar 13 was originally approved on February 24, 2010 for use in infants and children ages 6 weeks through 5 years.

To read the FDA's press release visit:

<http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm285431.htm>.

To read the FDA's approval letter visit:

<http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm285434.htm>.

Vaccine Records for High School Graduates

The NYS Education Department (NYSED) has asked high schools and health care providers to provide an immunization record to each graduating senior that includes the student's vaccine history. Minimally, this record must include documentation of having received two doses of MMR vaccine. Students entering college often do not have this documentation which results in delays in registering for or starting classes.

NYSED is encouraging high schools to forward a copy of each student's immunization record at the same time the final transcript is sent to each college or university. Additionally, high schools and health care providers are encouraged to provide each graduate with a copy of his or her immunization record to assist in gaining employment or pursuing higher education at a later date.

For more information contact the NYSED Student Support Services office at 518-486-6090.

CDC Reports on Adult Vaccination Coverage

On February 3, 2012 the MMWR published a CDC report summarizing results from a data analysis of adult (19 years of age or older) vaccination coverage for select vaccines. The data was collected from the 2010 National Health Interview Survey (NHIS). In short, the report indicates that recent improvements in adult vaccination coverage rates have been limited. Substantial increases are needed to reduce the occurrence of vaccine-preventable diseases among adults.

The report analyzed pneumococcal, hepatitis A, hepatitis B, herpes zoster (shingles), and human papillomavirus (HPV) vaccines, as well as tetanus antigen-containing vaccines (including tetanus, diphtheria, and acellular pertussis vaccine [Tdap]), by selected characteristics (age, vaccination target group status, and race/ethnicity). Influenza vaccination coverage estimates for the 2010-11 influenza season have been published separately.

Increases in coverage were observed only for Tdap vaccination for persons ages 19 to 64 years (1.6 percentage point increase to 8.2%), zoster vaccination among persons ages 60 years or older (4.4 percentage point increase to 14.4%), and one or more doses of HPV vaccination in women ages 19 to 26 years (3.6 percentage point increase to 20.7%); coverage for the other vaccines was unchanged at less than 70%.

To view the report, **Adult Vaccination Coverage – United States 2010**, visit:

http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6104a2.htm?s_cid=mm6104a2_e.

Health Care Providers Should Refrain from Using Vaccines Obtained from Off-site Pharmacies

The NYSDOH continues to receive reports of health care providers writing prescriptions for patients to obtain vaccine(s) from a local pharmacy and return to the health care provider with the vaccine for administration. The most commonly reported vaccine prescribed in this way is Zostavax.

This practice is discouraged by NYSDOH, CDC and other immunization experts.

Transporting of vaccine without the proper handling and storage specifications in place cannot guarantee that the vaccine will be safe or efficacious when administered to a patient. Certain vaccines are problematic for health care providers to obtain due to the cost. However, patient transport of vaccines is not an acceptable solution. For example, Zoster vaccine must be stored at freezer temperature at all times. If the vaccine has been out of the freezer for more than 30 minutes, it should not be used unless NYSDOH or the manufacturer has authorized its use.

For information on proper vaccine storage and handling go to:

www.cdc.gov/vaccines/recs/storage/guide/default.htm.

2011 Assessment, Feedback, Incentives, and eXchange (AFIX) Certificates of Excellence

As a new feature to *Immunize NY!*, health care providers that received an AFIX *Certificate of Excellence* during the previous calendar year will be recognized for their accomplishment.

The AFIX program assesses health care providers' immunization practices and rates of patients who are between 24 and 35 months of age. Certificates of Excellence are presented to health care providers who have achieved a 90% or greater vaccine coverage levels of 4 Diphtheria, Tetanus, acellular Pertussis, 3 Polio, 1 Measles, Mumps and Rubella, 3 Haemophilus influenza type B, and 1 varicella (4-3-1-3-1).

Certificates of Excellence were presented to the following New York State practices or physicians in 2011:

- **Bassett Healthcare Network**, St. Johnsville
- **Capital District Pediatrics**, Niskayuna
- **Grello Pediatrics**, West Islip
- **Hudson River Healthcare**, Beacon
- **Huntington Village Pediatrics**, Huntington
- **Llobet Medical Group**, Margaretville
- **Pathway Pediatrics**, Rochester
- **Queensbury Family Health**, Queensbury
- **Wantagh Pediatrics**, North Bellmore
- **Dr. Vilma Junio**, Oswego
- **Dr. Pashu Pati Kumar**, Schenectady
- **Drs. Hafiz Ur Rehman and Saiqa Nabi**, Bay Shore

Did you know?

Federal law requires that a copy of the appropriate Vaccine Information Statement (VIS) be given to the adult recipient or to a child's parent/legal representative prior to vaccination.

Visit the CDC for more specific information on complying with this mandate, VISs in other languages and more.

www.cdc.gov/vaccines/pubs/vis/default.htm.

Preparing your Patients for Summer Travel

Health care providers should remind patients planning to travel abroad about the importance of being up-to-date with vaccinations. Measles in particular is among the most contagious diseases. Greater than 30,000 cases of measles were reported from 40 countries across Europe in 2011. Thus far in 2012, 4,500 cases have been reported in Western Europe. More than half of US measles cases are imported from Americans returning home from visits to other countries.

The CDC recommends that athletes and fans traveling to London, England for the 2012 Summer Olympic Games get a measles vaccine before leaving the US.

Providers should ensure that patients traveling outside the US receive the additional recommended and required vaccines before traveling.

More information is available at the following sites:

- CDC's In the News/Measles Update, wwwnc.cdc.gov/travel/notices/in-the-news/measles.htm
- CDC's Travelers'Health wwwnc.cdc.gov/travel/
- MMWR *Measles – United States, 2011*
www.cdc.gov/mmwr/preview/mmwrhtml/mm6115a1.htm?s_cid=mm6115a1_w

Vaccine Shortages, Delays and Recalls

Information on national vaccine shortages and supply is available at the CDC website:
<http://www.cdc.gov/vaccines/vac-gen/shortages>.

Vaccine recall information will be provided as it is necessary through the NYSDOH Health Commerce System (HCS) and through this newsletter.

General information on recalled vaccines is available at the CDC website:
<http://www.cdc.gov/vaccines/recs/recalls/default.htm>.

New Tool To Make Sure Every Injection is a Safe Injection



When you read the headlines, your first instinct might be to say, “Unsafe injections happen in *other* communities!” or “Those incidents happened *years ago!*”

Well, look at the datelines: these sobering headlines about lapses in basic infection control practices are **real** and **recent** (most within the past year). And unsafe injections could become **your** problem if you work at a state or local health department or if you are a physician or nurse in a medical practice, ambulatory surgical center or hospital.

Thankfully, the Safe Injection Practices Coalition’s (SIPC) *One & Only Campaign* (“*One Needle, One Syringe, Only One Time*”) has developed a toolkit that can help you **prevent** this kind of transmission of disease *before* it happens. And it is a very real concern: the SIPC says since 1999, over 125,000 patients have been notified that they might be at risk for hepatitis B (HBV), hepatitis C (HCV), or HIV because a health care provider reused a needle/syringe or misused a single-dose or multi-dose vial of medicine. That number might just represent the “tip of the iceberg,” as symptoms of these illnesses often surface months or years after exposure, when it is too late to pinpoint the exact date and mode of transmission.

Why as a nurse or physician, should you be involved? Because you want to keep your patients safe, you want your staff and colleagues to be educated on infection control and you don’t want to see your practice cited in headlines like those above. Taking steps to prevent transmission of disease will also help prevent liability to your practice.

Why should health departments be involved? Because you might be on the “frontlines” in responding if there were to be an outbreak in your jurisdiction. Local health departments might be particularly interested to know that the costs of an outbreak of disease transmitted by unsafe injections can be steep; the Southern Nevada Health District estimates the cost of its 2008 Las Vegas hepatitis outbreak—where 63,000 patients were notified—at between \$16 to \$21 million dollars. That is a cost borne, ultimately, by the entire community.

Knowing that many local and state health departments are currently facing budget cuts and staff reductions, this toolkit was designed specifically to help you start spreading the *One & Only* injection safety message at **no cost and minimal time and effort**. The toolkit includes information on the economic, liability and licensure impacts of unsafe injections; advice from the *One & Only Campaign*’s 2011 partner states (New York, New Jersey and Nevada, all states that have seen significant patient notifications due to unsafe injections); how to set up an advisory working group; how to develop partnerships; press release and patient notification letter templates; and tips on dealing with media. Also included are download/ordering instructions for free *One & Only* educational materials, and key resources, such as peer-reviewed articles and links to Centers for Disease Control and Prevention (CDC) guidance on injection safety. The state/local health department injection safety toolkit can be accessed online via this link:

<http://www.oneandonlycampaign.org/content/statelocal-health-department-toolkit>

Learn more about the *One & Only Campaign* in New York and nationwide at:

<http://www.oneandonlycampaign.org>

Immunization Resources

General Vaccine and Immunization Information

- NYSDOH: www.health.ny.gov/prevention/immunization/providers/
- CDC Health Care Professionals: www.cdc.gov/vaccines/hcp.htm
- **Receive CDC email notifications automatically** when new immunization information is available. Subscribe to the CDC's free email subscription service at: www.cdc.gov/emailupdates/index.html
- CDC's Epidemiology and Prevention of Vaccine-Preventable Diseases "The Pink Book" (where you will also find foreign language terms for vaccines and diseases): www.cdc.gov/vaccines/pubs/pinkbook/index.html
American Academy of Pediatrics (AAP): www2.aap.org/immunization/
- Immunization Action Coalition (IAC): www.immunize.org/
- Children's Hospital of Philadelphia: www.chop.edu/service/vaccine-education-center/home.html

Vaccine Safety Basics

- CDC: *Provider Resources for Vaccine Conversations with Parents*. Be sure to click on "Get Email Updates" on the CDC link to receive emails every time information on the *Provider Resources for Vaccine Conversations with Parents* page is updated. <http://www.cdc.gov/vaccines/spec-grps/hcp/conversations.htm>
- IAC: *Need Help Responding to Vaccine-hesitant Parents?* <http://www.immunize.org/catg.d/p2070.pdf>
- NYSDOH: www.health.ny.gov/prevention/immunization/vaccine_safety/
- CDC: www.cdc.gov/vaccinesafety/index.html
- CDC: CDC Vaccine Safety Information for Parents: www.cdc.gov/vaccinesafety/populations/parents.html
- IAC: www.immunize.org/concerns/
- Every Child By Two: www.vaccinateyourbaby.com
- FDA: www.fda.gov/BiologicsBloodVaccines/Vaccines/default.htm
- AAP: www2.aap.org/immunization/families/safety.html
- Children's Hospital of Philadelphia, Vaccine Education Center: www.chop.edu/service/vaccine-education-center/home.html

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Receive email notifications when
new or updated immunization
information is available:

www.cdc.gov/emailupdates/index.html.

Click on *Subscribe*, then click on all immunization topics of interest.

Important Contact Information

NYSDOH Bureau of Immunization

Phone: 518.473.4437 email: immunize@health.state.ny.us

Website: <http://www.health.ny.gov/prevention/immunization/>

For further information, please contact your local health department or regional NYSDOH Bureau of Immunization office:

Western Regional Office

Buffalo: 716-847-4501

Rochester: 585-423-8014

Central New York Regional Office

Syracuse: 315-477-8164

Capital District Regional Office

Troy: 518-408-5278

Oneonta: 607-432-2890

Metropolitan Area Regional Office

New Rochelle: 914-654-7149

Central Islip: 631-851-3096

Monticello: 845-794-5627

Health care providers and facilities in New York City should contact:
New York City Department of Health and Mental Hygiene, 347-396-2400.

Email the NYSDOH Bureau of Immunization
to receive this e-newsletter directly if you did not.