

SHOT TALK

Visit www.sanantonio.gov/health/immunizations.html for news about the control and prevention of vaccine-preventable diseases.

National, State, and Local Area Vaccination Coverage Among Children Aged 19-35 Months

Since 1994, the National Immunization Survey (NIS) has been gathering data to examine childhood immunization coverage. The September 17, 2010 MMWR explains the 2009 NIS coverage estimates for children born during January 2006-July 2008. It also concentrates on the current recommended vaccines (i.e., Hepatitis B, Hepatitis A, Pneumococcal Conjugate [PCV], and Rotavirus vaccine) for children 19-35 months of age. The most current NIS data shows that nationally, vaccination coverage increased in 2009 compared with 2008 for Hepatitis B birth dose (from 55.3% to 60.8%) and Hepatitis A (from 40.4% to 46.6%). But coverage for PCV remained stable (80.4%). Full coverage for Rotavirus vaccine was 43.9% among children born within 2 years of licensure. Coverage for Poliovirus (92.8%), Measles, Mumps, and Rubella (MMR) (90.0%), Hepatitis B (92.4%), and Varicella (89.6%) vaccines continued to be at or near the national health objective of 90%, although coverage for MMR and Hepatitis B vaccines slightly declined in 2009. The percentage of children who have not received any vaccines remain low at less than 1%. For more information, please see the full article, National, State, and Local Area Vaccination Coverage Among Children Aged 19-35 Months—United States, 2009 in Centers for Disease Control and Prevention (CDC) Morbidity and Mortality Weekly Report.

Estimated vaccination coverage for vaccination series (modified)* and selected individual vaccines among children aged 19-35 months, National Immunization Survey, Bexar County, 2009

MMR (≥1 doses)	PCV (≥4 doses)	Hep B (birth)	Hep A (≥2 doses)	Rotavirus	Vaccine series (modified *)
87.6%	76.3%	58.3%	51.2%	49.9%	65.4%

*Includes ≥4 doses DTP/DT/DTaP, ≥3 doses of poliovirus vaccine, ≥1 dose of any measles-containing vaccine, ≥3 doses of HepB, ≥1 dose of varicella, & ≥4 doses of PCV : Hib vaccine excluded.

2010 National Immunization Survey

Recently, the San Antonio Metro Health District (SAMHD) mailed out a letter and instructions for completing the 2010 National Immunization Survey-Immunization History Questionnaire for children and teens to over 500 immunization providers in San Antonio. Metro Health would like to ensure the accurate completion of this survey because they determine the immunization coverage levels reported for the San Antonio/Bexar County area by the Centers for Disease Control and Prevention (CDC). Your office may receive these surveys if the parent or guardian reported to NIS that their child's immunizations were received in your office.

The San Antonio/Bexar County area was nationally recognized by the CDC in 2009 for having improved 11.3 percentage points in childhood immunization coverage levels from 2004-2008, based on National Immunization Survey data. However, the coverage levels for our area declined in 2009 by 6.6 percentage points. This decline emphasizes the importance of accurately completing the Immunization History Questionnaires that your office may receive from NIS. SAMHD is available to assist you so that a complete accurate immunization history can be documented for every child.

If your office does not have a complete immunization record for a child or has any questions about completing the surveys, please call Clark Petty at 207-2869 or Sandra Hermosa at 207-2084 for assistance.

Will eSAIRS Benefit You?

In 2011, the San Antonio Metropolitan Health District will launch a new and enhanced immunization information system called eSAIRS. eSAIRS is a secured web based application used to collect child/adult immunization information. The system will instantly provide immunization status of clients to participating providers, schools, daycares, health plans, and federal public health authorities. The system maintains client immunization histories, even if clients change doctors. eSAIRS will also allow doctors to provide clients with an official immunization record. eSAIRS will help ensure vaccines are given appropriately and in a timely manner thereby giving community health care providers and patients peace of mind knowing that shots are not given needlessly due to lost or missing records. Only authorized providers will be able to access eSAIRS. eSAIRS will protect the confidentiality of each individual's personal information through a series of administrative, physical, and technical safeguards.

Other great benefits that eSAIRS will offer include:

- Real-time immunization forecasting
- Real-time deduplication

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- VFC (Vaccines for Children) eligibility tracking
- Vaccine tracking
- The capability of direct data entry/data exchange
- The ability to update the system to coincide with new vaccine requirements

While the current registry has been in place for over 30 years, the new registry (eSAIRS) will upgrade and reinforce the benefits within the current system. Come on board with eSAIRS and discover what the new registry is all about! For more information, please contact Maria Lozoria at 207-2083 or maria.lozoria@sanantonio.gov.

Respiratory Syncytial Virus (RSV)

The San Antonio Metropolitan Health District (SAMHD) has been involved in a program for the prevention of Respiratory Syncytial Virus (RSV) infections in infants and young children less than two years of age. RSV is a very common virus that causes mild cold-like symptoms. It can cause serious respiratory infections in young babies, especially those born prematurely, who have heart or lung disease, or who are immunocompromised. Outbreaks of RSV infections typically begin in the fall and run into the spring.

Becoming infected with RSV does not establish any immunity to the virus. Therefore, children can become infected again. RSV is spread easily by physical contact including touching, kissing and shaking hands with an infected person. The Synagis® medication is provided to prevent these children from developing severe infections and complications. Synagis® is administered by injection once a month throughout the RSV season (October to March). It has been proven to prevent serious disease and reduce hospitalization due to RSV infection. SAMHD will not be conducting the Synagis program during the 2010-2011 season. Please feel free to contact us for general information or referral assistance at (210) 207-3968 or (210) 207-3965.

Easy-to-Access Vaccine Package Inserts and Contact Information for Vaccine Manufacturers

Looking for vaccine product information? The Immunization Action Coalition's (IAC) Package Inserts and Manufacturers web sections make it easy to find all package insert information for vaccines licensed for use in the United States. In addition, the Manufacturers section provides website links, contact information, and product listings for vaccine and immune globulin manufacturers.

For links to package inserts for all U.S.-licensed vaccines, visit: <http://www.immunize.org/packageinserts>

For the listings of U.S. vaccine product manufacturers, visit: http://www.immunize.org/resources/manufact_vax.asp

In addition to the listings of vaccine package inserts and vaccine manufacturers, IAC's online compendium of immunization resources includes descriptions and links for the following sections: Books and Periodicals, CDC Materials, Continuing Education Opportunities, Email News Services, Government Agencies, Hotlines, International Organizations, Partners, and more. To access these sections, go to <http://www.immunize.org/resources>

Most Common Q&A's from the Immunization Action Coalition (IAC), "Ask the Experts" Section

Many readers of the Immunization Action Coalition's (IAC) Needle Tips and Vaccinate Adults consistently rank "Ask the Experts" as their favorite feature in these publications. In the IAC Express #891, the IAC published its "golden oldies" edition that is a collection of the most commonly asked vaccine questions by healthcare professionals. Although the topics are not new, they continue to be a source of confusion according to IAC. Drs. William L. Atkinson, MD, MPH, and Andrew T. Kroger, MD, MPH, medical epidemiologists at the National Center for Immunization and Respiratory Diseases, CDC, are the most frequent "experts" for the "Ask the Experts" section. Please forward these Q&A's to your co-workers. Your office can subscribe to IAC Express at <http://www.immunize.org/subscribe>

Q: Is it necessary to start a vaccine series over if a patient doesn't come back for a dose at the recommended time, even if there's been a year or more delay?

A: For routinely administered vaccines, there is no vaccine series that needs to be restarted because of an interval that is longer than recommended. In certain circumstances, oral typhoid vaccine (which is sometimes given for international travel) needs to be restarted if the vaccine series isn't completed within the recommended time frame.

Q: We gave a dose of vaccine too soon after the previous dose. When can we give the additional dose that will rectify this error?

A: The repeat dose should be spaced after the invalid dose by an interval at least equal to the recommended minimum interval. You can find the table of minimum intervals and ages for routinely given vaccines here:

<http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/A/age-interval-table.pdf>

Q: Which vaccines can be given simultaneously?

A: All vaccines used for routine vaccination in the United States can be given simultaneously (i.e., at the same visit, not in the same syringe). However:

- If two live vaccines are not given simultaneously, you must wait at least 4 weeks before administering the second live vaccine.
- Inactivated vaccines can be given at any time before or after each other and/or live vaccines.



Q: What vaccines are safe to give to a breastfeeding mother?

A: Women who are breastfeeding can receive all routine vaccines, including live vaccines. The only vaccine that should not be given to breastfeeding women is smallpox.

Q: Do you need to aspirate before vaccinating?

A: No. ACIP guidance does not recommend aspirating (pulling back on the syringe plunger once the needle is in the arm before injecting, to see if you get blood return) when administering vaccines. No data exist to justify the need for this practice. IM injections are not given in areas where large vessels are present. Given the size of the needle and the angle at which you inject the vaccine, it would be very difficult to administer the vaccine intravenously.

Q: Is it necessary to wear gloves when we administer vaccinations?

A: No. Occupational Safety and Health Administration (OSHA) regulations do not require healthcare personnel to wear gloves when administering vaccinations, unless the healthcare worker is likely to come into contact with potentially infectious body fluids or has an open lesion on her or his hand. If a healthcare worker chooses to wear gloves, he or she must change them between each patient encounter.

Q: If a dose of vaccine is given by the wrong route (IM instead of SC or vice versa), does it need to be repeated?

A: Although vaccines should always be given by the route recommended by the manufacturer, if a vaccine is inadvertently given by the wrong route, ACIP recommends that it be counted as valid with two exceptions: Hepatitis B or rabies vaccine given by any route other than IM should not be counted as valid and should be repeated.

Q: What is the law regarding patients/parents signing consent for vaccination?

A: There is no federal requirement for signed consent for vaccination. Local governmental units, institutions, and clinics may have their own requirements.

Q: Where can I get VISs for some of the newer combination vaccines?

A: CDC currently has no plans to develop VISs for Pediarix, Comvax, Twinrix, TriHIBit, Kinrix, or Pentacel. When administering these combination vaccines, use the VISs for all component vaccines. For certain combination vaccines given to children, you can use the multi-vaccine VIS and check the appropriate box(es), just as you would if you were administering the individual vaccines.

- A VIS was developed for MMRV vaccine because of its unique adverse reaction profile.
- For VISs in more than 35 languages, go to:

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

Q: What are some of the most commonly used references for information about immunization for healthcare professionals who want to get answers on their own?

A: The following are some basic resources for anyone providing immunization services.

- ACIP's "General Recommendations on Immunization." To obtain a ready-to-print (PDF) version, go to:

<http://www.cdc.gov/mmwr/PDF/rr/rr5515.pdf>

- All ACIP recommendations can be accessed on CDC's website at <http://www.cdc.gov/vaccines/pubs/ACIP-list.htm> or from IAC's website at: <http://www.immunize.org/acip>
- The American Academy of Pediatrics' vaccine policy statements can be found on IAC's website at: <http://www.immunize.org/aap>
- CDC's "Pink Book" can be read or downloaded as a whole or by chapter, go to: <http://www.cdc.gov/vaccines/pubs/pinkbook>
- CDC's immunization schedules for infants, children, adolescents, and adults. To access the schedule(s) of your choice, including catch-up schedules that contain minimum intervals, go to: <http://www.cdc.gov/vaccines/recs/schedules>

You can email your question about vaccines or immunization to IAC at admin@immunize.org. Due to the large number of emails received each month, IAC cannot guarantee that they will print your specific question in the "Ask the Experts" feature. However, you will get an answer. To see if your question has already been answered, you can first check the "Ask the Experts" online archive at <http://www.immunize.org/askexperts>

This information is adapted from IAC Express #891 printed on October 4, 2010. We thank the Immunization Action Coalition for this valuable information.

Don't Fall Behind...Immunize on Time!!

Fall has arrived and the Quality Assurance/AFIX (QA/AFIX) team would like to take this time to remind providers to ensure their clients do not fall behind when it comes to keeping their immunization status up to date. Have you had a QA/AFIX visit this year? It's not too late to schedule one for 2010. The QA/AFIX Team is always willing to assist you in arranging an appointment for a site visit to benefit your facility. Each visit is designed to provide assistance with identifying possible barriers to immunization that may result in low vaccination coverage or missed opportunities. The primary role of the QA/AFIX Team is to assist providers in finding practical solutions to immunization related dilemmas within their facilities.

Please feel free to contact Kenya Wilson, MA, Vaccines for Children Program Coordinator at (210) 207-3974 or Maria Torres, QA/AFIX Supervisor at (210) 207-3972 should you need additional information.

The members of the QA/AFIX Team would like to thank the following providers and their staff for participating in the QA/AFIX site review visit process during this past quarter: *Dr. Howard H. Galarneau, Jr., Internal Medicine Practice, San Antonio Pediatric Associates-315 San Saba, Northwest Pediatric Associates, Centro Med-Residential Treatment Center, Dr. Adelaida Tabet, San Antonio Pediatric Associates-S.W. Military, Centro Med-La Paloma Clinic,*





Christus Santa Rosa-Pediatric Mobile Unit, Blanco Road Medical Clinic, San Antonio Pediatric Associates-Main, Dr. K. Job Chacko, Dr. Thomas C. Wascher, Dr. Mary K. George, Kellum Medical Group-Lytle, Children of Texas Pediatrics, Bandera Family Healthcare-N. Loop 1604 W., Bandera Family Healthcare-Bandera Rd., Northside Pediatric Clinic, CommuniCare Health Center, Dr. G. Scott Cuming, Valdez Family Clinic, Kellum Pediatric Wellness Clinic, Alamo Heights Pediatrics, University Family Health Center-Northwest, Wesley Primary Care Medical Clinic, Dr. Maria Aguirre, San Antonio Pediatric Associates-Oak Center, San Antonio Pediatric Associates-S. Zarzamora, Buena Vista Family Practice, Dr. Mahendra Patel, San Antonio Pediatric Associates-Walzem, Holy Cross Family Practice, San Antonio Pediatric Associates-215 San Saba, Dr. Bhanumathi Nandakumar, Pediatrics & Adolescents, Centro Med-Haven for Hope, South Alamo Pediatric Clinic-Barlite, Westlakes Primary Care and Pediatric Care.

Congratulations go out to the following providers that achieved outstanding immunization coverage rates during the past quarter: Northwest Pediatric Associates (100%), Centro Med-Residential Treatment Center (100%), Centro Med-La Paloma Clinic (100%), Christus Santa Rosa-Pediatric Mobile Unit (100%), San Antonio Pediatric Associates-Main (100%), Northside Pediatric Clinic (100%), CommuniCare Health Center (100%), Dr. G. Scott Cuming (100%), Kellum Pediatric Wellness Clinic (100%), Alamo Heights Pediatrics (100%), University Family Health Center-Northwest (100%), San Antonio Pediatric Associates-Oak Center (100%), San Antonio Pediatric Associates-S. Zarzamora (100%), Buena Vista Family Practice (100%), Centro Med-Haven for Hope (100%), South Alamo Pediatric Clinic-Barlite (100%), Westlakes Primary Care (100%), Pediatric Care (100%), San Antonio Pediatric Associates-315 San Saba (96%), Dr. K. Job Chacko (96%), Dr. Mary K. George (96%), San Antonio Pediatric Associates-Walzem (95%), San Antonio Pediatric Associates-S.W. Military (95%), Children of Texas Pediatrics, (91%), Valdez Family Clinic (89%), Blanco Road Medical Clinic (88%), Pediatrics & Adolescents (88%), Dr. Maria Aguirre (85%), Dr. Adelaida Tabet (84%), and San Antonio Pediatric Associates-215 San Saba (82%).

Special Congratulations go out to these "Hot Shot" Offices: Northwest Pediatric Associates, Centro Med-Residential Treatment Center, Centro Med-La Paloma Clinic, Northside Pediatric Clinic, CommuniCare Health Center, San Antonio Pediatric Associates-Main, Kellum Pediatric Wellness Clinic, Alamo Heights Pediatrics, University Family Health Center-Northwest, San Antonio Pediatric Associates-Oak Center, San Antonio Pediatric Associates-S. Zarzamora, Centro Med- Haven for Hope, South Alamo Pediatric Clinic-Barlite, Westlakes Primary Care, and Pediatric Care.

All these facilities continue to invest substantial efforts towards improving children's immunization coverage levels and surpassed the National Immunization Program (NIP) goal of 90% immunization coverage for the 4:3:1:3:3:1:4 series. WAY TO GO!!! Keep up the great work.

VFC Provider Update

The Vaccines for Children (VFC) Team would like to **THANK** all enrolled provider offices for their continued daily efforts to protect the children and adolescents of our community. Below you will find a few updates and reminders relating to important VFC related subjects.

Vaccine Storage Equipment

VFC providers are reminded to check Certified Calibrated Thermometer Certificates to ensure the recalibration date has not passed. Thermometers issued through our program have reached or are close to reaching certificate expiration. All VFC enrolled provider offices are responsible for keeping up with the certification of thermometers used to monitor the internal temperatures of storage units containing VFC vaccines. Your facility will need to purchase replacement certified calibrated thermometers or recalibrate the one's currently on hand at your office to remain in compliance with VFC program requirements. Failing to do so will interrupt provider vaccine ordering privileges. Please remember to retain the certificate accompanying your thermometers as proof of certification. Certification certificates should be faxed into our office at 224-5710 Attn: Blanca and Yvonne. Thank you to those whom have already completed this task. For more information, contact Blanca Aguirre at 207-2861 or Yvonne Puente at 207-2860.

Immunization Division Contacts

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Adult/Influenza Program Supervisor: Sandra Hermosa, LMSW	207-2084
Infant/Childhood Education & Outreach Supervisor: Audrey Munoz, LVN, AAHA	207-6917
WIC Linkage Supervisor: Vacant-Contact Clark Petty	207-2869
Vaccines Studies Coordinator: Marcela Martinez	207-3968
Registry Project Coordinator: Walter Widish, MS	207-8792

Don't Fall Behind... Immunize on Time!!

Immunization Resource Sites

DSHS: www.dshs.state.tx.us/immune
CDC: www.cdc.gov/vaccines
IAC: www.immunize.org
Vaccine Education Center: <http://vaccine.chop.edu>
American Academy of Pediatrics: www.aap.org
Vaccine Information for the Public & Health Professionals: www.vaccineinformation.org
Healthy People 2010: www.healthypeople.gov

Need Forms??

VFC Reports, Blast Fax, and In-Service Materials:
www.sanantonio.gov/health/Immunizations-VFCResources.html
Consent Forms:
www.sanantonio.gov/health/Immunizations-SAIRS.html
VISs:
<http://www.cdc.gov/vaccines/pubs/vis/default.htm>



 **Child Care Associates**



 **CentroMed-Residential Treatment Center**



 **CentroMed-La Paloma Clinic**



 **Live Oak Pediatrics**

VFC Stars



 **Northwest Pediatric Associates**



 **San Antonio Pediatric Associates- Main**



Somerset Independent School District



Northside Pediatric Clinic



ABCD Pediatrics-Stone Oak



Dr. Thuy Dahn Do



Alamo Heights Pediatrics



CommuniCare



University Family Health Center-S.W.



University Family Health Center-North

Immunization Updates

The use of most **Vaccine Information Statements (VIS)** is mandated by federal law. Listed below are the dates of the most current VISs. Check your stock of VISs. If you have outdated VISs, print current ones from one of these sources: CDC's website at www.cdc.gov/vaccines/pubs/vis (has VISs in English) or IAC's website at www.immunize.org/vis (has VISs in more than 30 languages).

DTaP/DT/DTP.....5/17/07 PCV13.....4/16/10 Hepatitis A.....3/21/06 PCV7.....12/9/08 Hepatitis B.....7/18/07 Polio.....1/1/00 Hib.....12/16/98
 HPV (H. papillomavirus).....3/30/10 Rotavirus.....5/14/10 Meningococcal.....1/28/08 Varicella.....3/13/08 MMR.....3/13/08
 Influenza (LAIV).....8/10/10 Influenza (TIV).....8/10/10 Td/Tdap...11/18/08