

SHOT TALK

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

SAMHD Receives National Recognition

The San Antonio Metropolitan Health District (SAMHD) will be recognized with an award for the “Most Improved CDC Urban Immunization Grantee” at the 2009 National Immunization Conference being held March 30th – April 2nd in Dallas, Texas. Based upon National Immunization Survey (NIS) results from 2004-2008, Bexar County achieved an 11.3 percent increase for the 4:3:1:3:3:1 immunization coverage level. The State of Texas will also receive an award for the “Most Improved State CDC Grantee,” an honor that no doubt would have been difficult to achieve without the excellent job done in Bexar County.

Outreach and education efforts to both public and private providers continue to be a priority of the SAMHD Immunization Division. A big “Thank You” is in order to all community immunizers. The sustained efforts of area providers to immunize on time and accurately complete and submit NIS forms has been an integral part of our area’s increased rates. Congratulations to Bexar County and all those involved in helping to increase NIS coverage rates! For more information on the NIS go to www.cdc.gov/vaccines/stats-surv/imz-coverage.htm#nis

National Infant Immunization Week Celebration

The San Antonio Metropolitan Health District is preparing to celebrate National Infant Immunization Week (NIIW) April 25-May 2, 2009. NIIW is an annual observance to highlight the importance of protecting infants from vaccine-

preventable diseases and celebrate the achievements of immunization programs and their partners in promoting healthy communities. Since 1994, NIIW has served as a call to action for parents, caregivers, and healthcare providers to ensure that infants are fully immunized against 14 vaccine-preventable diseases.

Vaccination plays a critical role in safeguarding public health globally. During NIIW 2009, over 500 cities across the United States will join over 35

countries in the Western Hemisphere and Europe to celebrate Vaccination Week in the Americas (VWA) and European Immunization Week. Over sixty countries around the world will participate through community awareness, healthcare provider education, and media events to promote infant immunizations.

The highlight of National Infant Immunization Week in San Antonio, Texas will be the 12th Annual Vaccines for Children Provider Appreciation Luncheon held on Friday, May 1, 2009 at Marriott Hotel Northwest. Dr. Edgar Marcuse, Professor, Pediatrics, University of Washington, School of Public Health will be the keynote speaker. VFC providers, immunization partners, and community leaders will be invited and are encouraged to mark their calendars to attend this worthy event.

NIIW provides us the opportunity to create a forum to highlight the importance and benefits of childhood immunizations. It also allows us to focus our attention on immunization achievements while celebrating the accomplishments made possible through successful collaboration. Vaccines are among the most successful and cost-effective public health tools available for preventing disease, disability, and death. Because immunizations have been so successful, today’s parents rarely see children with the devastating effects of measles, rubella, tetanus, polio, or other vaccine-preventable diseases and may not realize these diseases still threaten the health and well being of their children and communities.

The San Antonio Metropolitan Health District would like to recognize Vaccines for Children providers for their dedication to the health of the community by celebrating NIIW on Friday, May 1, 2009. For more information on National Infant Immunization Week, contact Clark Petty at (210) 207-2869.

Inside Talk	Page
Perinatal Hep B Update	2
New Clinical Trial Study	2
Immunization Questions	2
QA/AFIX Update	3
VFC Stars	3
Division Contacts	4
Resources	4
Immunization Updates	4



NIIW 2009

Reporting Perinatal Hepatitis B in Texas is Required by State Law

The state of Texas has provided legislative directives to guide Perinatal Hepatitis B screening and reporting to protect the residents of Texas. The Texas Health and Safety Code, which is the statute that is most relevant to communicable disease control, requires serologic testing for Hepatitis B during pregnancy (Texas Health and Safety Code, Chapter 81, Subchapter E. 81.090). It also requires that specific information regarding notifiable conditions be reported to the San Antonio Metropolitan Health District (Texas Health and Safety Code Chapter 81, Subchapter C, 81.041, 81.042, 81.043 and 81.044). The Texas Administrative Code, which is a compilation of all Texas State Agency rules, addresses the mandated role of health care providers, hospitals, laboratories, schools, and others to report patients who are suspected of having a notifiable condition (Texas Administrative Code Title 25, Part 1, Chapter 97).

The specific references to Perinatal Hepatitis B are summarized as follows:

- Providers and hospitals must screen all pregnant women for Hepatitis B surface antigen (HBsAg) at their first prenatal visit and at delivery (Texas Administrative Code Title 25, Part 1 Chapter 97, Subchapter F 97.135)
- All positive results for Perinatal Hepatitis B and HBsAg mothers must be reported to SAMHD (Texas Administrative Code Title 25, Part 1, Chapter 97, Subchapter A 97.3)

It is imperative that legal requirements be shared with health care providers and hospitals to reduce the transmission of Perinatal Hepatitis B. The federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), which protects the privacy of medical information, contains specific exceptions that allow covered entities to disclose private health information if required by law [Section 164.512 a]. It also allows covered entities to release private health information to a public health authority that is authorized by law to collect and receive information for preventing and controlling disease, injury, or disability [Section 164.512 b].

One of the most difficult challenges for the SAMHD Perinatal Hepatitis B Prevention program is obtaining reports of Hepatitis B Surface Antigen positive pregnant women. To have a successful reporting system, a program should have several overlapping sources of information to identify cases. Three main reporting sources are laboratories, prenatal care providers, and delivery hospitals.

To eliminate the transmission of Perinatal Hepatitis B, the three sources mentioned must work together with the SAMHD Perinatal Hepatitis B Prevention Program. For more information on the SAMHD Perinatal Hepatitis B Prevention Program, call Tom Gonzalez, MLT at 207-2088.

Novartis Study

The San Antonio Metropolitan Health District (SAMHD) is conducting an investigational research study of a new meningococcal vaccine. Meningococcal disease is a serious infection that can cause meningitis which is an infection that causes inflammation of the membranes covering the brain and spinal cord. The most common causes of meningitis are viral infections that usually resolve without treatment. However, bacterial infections of the meninges are extremely serious illnesses, and may result in death or brain damage even if treated.

The objective of this study is to evaluate the safety and tolerability of an investigational meningococcal vaccine when administered with routine infant vaccinations to healthy infants beginning at two months of age. This vaccine is not currently FDA approved, but it has been administered to over 12, 000 subjects in previous studies. The study consists of four visits over a 16 month period of time. All study participants will receive services at no cost and will be compensated for their time and travel. For more information, please contact the SAMHD at (210)-207-3968 or (210)-207-3965.

Immunization Questions???

✚ **What vaccines are affected by the new school requirements and why are they being added?**

Five new vaccine requirements have been added and the vaccines affected are Hepatitis A, MMR, Varicella, Tdap, and Meningococcal. 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 Centers for Disease Control and Prevention (CDC) and Advisory Committee on Immunization Practices (ACIP) recommendations.

✚ **When will the new vaccine school requirement changes be effective?**

The new school requirements will be effective 8/1/2009.

✚ **What if a student had a previous illness of the varicella disease (chickenpox), will they still need the vaccine?**

No. If a student has had chickenpox, they will not need to receive the vaccination. A written statement from a parent, legal guardian/managing conservator, school nurse, or physician attesting to a child's positive history of varicella

disease, or of varicella immunity, is acceptable in lieu of either dose of varicella vaccine.

✦ What if a student is entering 7th grade and it has been less than 5 years since the last tetanus-containing vaccine, will they still need the Tdap vaccination?

Students in the seventh grade will be required to have a booster dose of Tdap only if it has been five years or more since their last dose of tetanus-containing vaccine. Students in grades 8 through 12 will be required to have a booster dose of Tdap vaccine if it has been at least 10 years since their previous dose of a tetanus-containing vaccine. Td is acceptable in lieu of Tdap if a contraindication to pertussis vaccine exists, i.e. child has had a previous reaction to pertussis vaccine. For more details on school and child care facility requirements go to www.dshs.state.tx.us/immunize/school/default.shtm

QA/AFIX Springs Forward

This year has already been productive for the QA/AFIX Team. Since January 1, 2009 the QA/AFIX Team has been instrumental in working with VFC enrolled providers to ensure they are on track with Healthy People 2010 goals. There is less than a year to achieve and maintain the goal of 90% coverage for universally recommended vaccines among young children 4 DTaP, 3 Hep B, 1 MMR, 3 Hib, 3 IPV, 1 VAR, and 4 PCV. The VFC Program currently has 77 provider offices that have reached and/or exceeded the goal, while 28 are within to 10% of reaching the 2010 goal.

The QA/AFIX Team is always willing to assist you in arranging an appointment for a site review visit to benefit your facility. Site Review Visits provide valuable information to providers on their immunization rates. Each visit is designed to help identify possible barriers to immunization that may result in low vaccination coverage or missed opportunities for immunization. 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 QA/AFIX Supervisor at (210) 207-3974 or Maria Torres, Health Program Specialist 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:

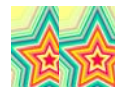
Thousand Oaks Pediatrics, Respite Care Medical Wellness Clinic-CentroMed, Dr. Daniel G. Penon, Family First Care Clinic, Saint Raphael Family Focused Medicine, Alpha Pediatrics, Clinica del Norte Pediatrics, Dr. Garcia,

Christus Santa Rosa Family Practice, CentroMed-South Zarzamora, Kellum Medical Group-Schertz, Kellum Pediatric Clinic, Dr. Escalante, Trevino Family Clinic-Pleasanton, and Express Med Clinic-University Health System.

Congratulations go out to the following providers that achieved outstanding immunization coverage rates during the past quarter: Thousand Oaks Pediatrics (100%), Respite Care Medical Wellness Clinic-CentroMed (100%), CentroMed-South Zarzamora (100%), Trevino Family Clinic-Pleasanton (100%), Kellum Pediatric Clinic (100%), Christus Santa Rosa Family Practice (95%), Clinica del Norte Pediatrics (91%), and Kellum Medical Group-Schertz (82%).

These facilities worked proactively to ensure that over 80% of the children seen in their practices are up-to-date on their required immunizations of 4 DTaP, 3 Hep B, 1 MMR, 3 Hib, 3 IPV, 1 VAR, and 4 PCV by 24 months of age. All of these facilities invested substantial efforts towards improving immunization coverage levels within their practices. JOB WELL DONE!! Keep up the great work!!

Special Congratulations go out to Thousand Oaks Pediatrics, Respite Care Medical Wellness Clinic-CentroMed, CentroMed-South Zarzamora, Trevino Family Clinic-Pleasanton, and Kellum Pediatric Clinic. These facilities surpassed the Healthy People 2010 goal of 90% immunization coverage for the 4:3:1:3:3:1 series, receiving a perfect score of 100%. In fact, this is the 5th consecutive year that CentroMed-South Zarzamora has received a perfect score. It's the 3rd consecutive year for Kellum Pediatric Clinic. Immunizing on time is definitely a top priority for these offices. Impressive work!!



VFC Stars



Thousand Oaks Pediatrics



University Family Health Center-North West



CentroMed - South



Immunization Division Contacts

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Registry Project Coordinator: Walter Widish, MS	207-8792

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:
www.sanantonio.gov/health/immunizations-VFCforms.html
Consent Forms:
www.sanantonio.gov/health/immunizations-SAIRS.html
VISs:
<http://www.cdc.gov/vaccines/pubs/vis/default.htm>

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 PCV.....12/9/08 Hepatitis A.....3/21/06 PPV.....7/29/97 Hepatitis B.....7/18/07 Polio.....1/1/00 Hib.....12/16/98 HPV (H. papillomavirus).....2/2/07 Rotavirus.....8/28/08 Meningococcal.....1/28/08 Varicella.....3/13/08 MMR.....3/13/08 Influenza (LAIV).....7/24/08 Influenza (TIV).....7/24/08 TD/Tdap...11/18/08