

# VACCINES FOR CHILDREN



Dallas County  
Health and Human Services

WINTER 2016 - NEWSLETTER

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**Dec 4-10, 2016**



**N**ational Influenza Vaccination Week (NIVW) was established to highlight the importance of continuing flu vaccination through the holiday season and beyond.

Flu vaccination coverage estimates from past years have shown that influenza vaccination activity drops quickly after the end of November. NIVW serves as a reminder that even though the holiday season has arrived, it is not too late to get your flu vaccine. As long as flu viruses are spreading and causing illness, vaccination should continue throughout the flu season in order to provide protection against the flu. Even if you haven't yet been vaccinated and have already gotten sick with one flu virus, you can still benefit from vaccination since the flu vaccine protects against three or four different flu viruses (depending on which flu vaccine you get).

Another goal of NIVW is to communicate the importance of flu vaccination for people who are at high risk for developing flu-related complications.

People at high risk of serious flu complications include:

- young children,
- pregnant women,
- people with certain chronic health conditions like asthma, diabetes, heart disease or lung disease,
- people aged 65 years and older.

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# VACCINES FOR CHILDREN

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For people at high risk, getting the flu can mean developing serious flu-related complications, like pneumonia, or a worsening of existing health conditions, which can lead to hospitalization or death.

Getting an annual flu vaccine is the first and best way to protect against the flu. Flu vaccination can reduce flu illnesses, doctors' visits, and missed work and school due to flu, as well as prevent flu-related hospitalizations. The more people who get vaccinated, the more people will be protected from flu, including older people, very young children, pregnant women and people with certain health conditions who are more vulnerable to serious flu complications.

### What's new this flu season?

- Only injectable flu shots are recommended this season.
- Flu vaccines have been updated to better match circulating viruses.
- There will be some new vaccines on the market this season.
- The recommendations for vaccination of people with egg allergies have changed.

What flu vaccines are recommended this season?

This season, only injectable flu vaccines (flu shots) should be used. Some flu shots protect against three flu viruses and some protect against four flu viruses.

### Who should get vaccinated?

Everyone 6 months and older should get a flu vaccine every year by the end of October, if possible. However, getting vaccinated later is OK. Vaccination should continue throughout the flu season, even in January or later. Some children who have received flu vaccine previously and children who have only received

one dose in their lifetime, may need two doses of flu vaccine. For 2016–17, ACIP recommends that children aged 6 months through 8 years who have previously received  $\geq 2$  total doses of trivalent or quadrivalent influenza vaccine before July 1, 2016 require only 1 dose for 2016–17. The two previous doses need not have been given during the same season or consecutive seasons. Children in this age group who have not previously received a total of  $\geq 2$  doses of trivalent or quadrivalent influenza vaccine before July 1, 2016 require 2 doses for the 2016–17 season. The interval between the 2 doses should be at least 4 weeks.

Children younger than 6 months are at higher risk of serious flu complications, but are too young to get a flu vaccine. Because of this, safeguarding them from flu is especially important. If you live with or care for an infant younger than 6 months of age, you should get a flu vaccine to help protect them from flu. Also, studies have shown that getting the flu vaccine during pregnancy can protect the baby after birth for several months.

### Can I get a flu vaccine if I am allergic to eggs?

The recommendations for people with egg

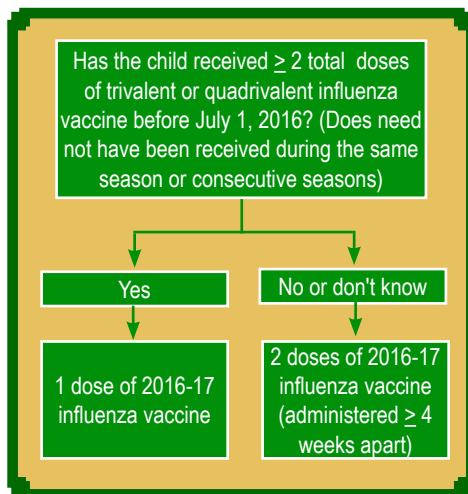


allergies have been updated for this season.

- People who have experienced only hives after exposure to egg can get any licensed and recommended flu vaccine that is otherwise appropriate for their age and health.
- People who have symptoms other than hives after exposure to eggs, such as angioedema, respiratory distress, lightheadedness, or recurrent emesis; or who have needed epinephrine or another emergency medical intervention, also can get any licensed and recommended flu vaccine that is otherwise appropriate for their age and health, but the vaccine should be given in a medical setting and be supervised by a health care provider who is able to recognize and manage severe allergic conditions. People with egg allergies no longer have to wait 30 minutes after receiving their vaccine.

### When will flu activity begin and when will it peak?

The timing of flu is very unpredictable and can vary in different parts of the country and from season to season. Seasonal flu viruses can be detected year-round, however, seasonal flu activity can begin as early as October and continue to occur as late as May. Flu activity most commonly peaks in the United States between December and March.



## Temperature Excursions

TVFC vaccines are required to be maintained at proper storage temperatures at all times. To ensure proper temperatures are maintained, TVFC requires providers to record refrigerator and/or freezer temperatures twice daily for all units that store TVFC vaccine. Providers are also required to record min/max temperatures at least once daily, preferably in the morning. Results of each check must be documented on the Temperature Recording Form and the form must be initialed by the staff member conducting the check. Instructions for completing the Temperature Recording Form are listed on the top of the form.



If an out-of-range temperature is observed, **immediately** suspend use of the vaccine, isolate and label **DO NOT USE---** Until the viability of your vaccine has been determined. Contact the manufacturer for each vaccine stored in the unit at the time of the excursion. Complete the Vaccine Storage Troubleshooting Record attached to the Temperature Recording Form.

Providers must include:

- Date and time of event
- Storage unit temperature
- Room temperature
- Name of person completing the report
- Description of the event
- Action taken (including the instructions and procedures given by the responsible entity and

the individual with whom you spoke)

### • Results

Once the viability has been determined, request the documentation of determination from the manufacturer. Also, complete a wasted and expired form if needed.

Ensure all dates related to the excursion are accurately transcribed on the trouble shooting record as well as on the documentation obtained from the manufacturers. In the event there is a discrepancy contact the manufacturer and verify all information received. Obtain revised determination if applicable..

Contact your VFC representative. Submit completed trouble shooting form, manufacturer's letters, waste expired form (as it applies), and temperature log to DCHHS.

## Data Loggers

The Texas Vaccines For Children (TVFC) Program recommends the use of continuous temperature monitoring systems (Data Loggers) to monitor the temperature of vaccines. Data Loggers provide more accurate and comprehensive monitoring of the temperature within the vaccine storage units allowing for easy identification of temperature excursions to which vaccines may be exposed. As of January 1, 2018, all enrolled VFC providers must use a continuous temperature monitoring and recording device within storage units that store vaccine provided through the VFC program.

### Minimum Data Logger Features and Specifications for Temperature Monitoring of Refrigerated Vaccines

#### Detachable temperature probe

- To be kept in liquid-filled bottle
- Cable length > 1 m preferred

#### Continuous temp monitoring

- At least one reading/15 min

#### Memory storage : 4000 readings

- ~ 39 days recording at one rdg/15 mins
- Device stops recording when memory is full, reset after data download

#### Operating range: -20 °C to 40 °C

- (for refrigerated vaccine monitoring)

#### Uncertainty: ± 0.5 °C

- In the range of -1 °C to 15 °C
- Often listed as device "accuracy"

#### Resolution: ± 0.1 °C

#### Battery life: 6 months minimum

#### Integrated Liquid Crystal Display (LCD) with minimum:

- Last measured temp displayed in °C or °F
- Hi/Low alarm status indicator

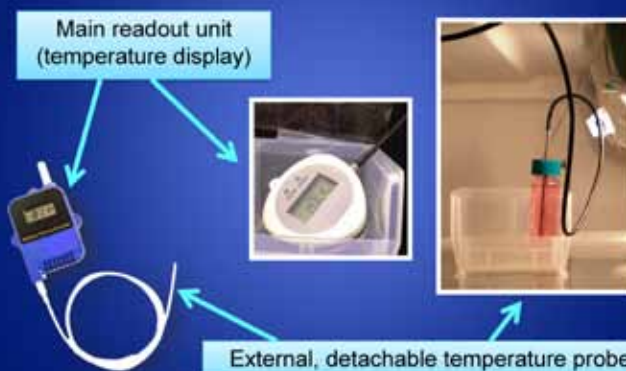
#### Alarm capabilities

- Factory set, end-user adjustable
- Alarm activation at 2 °C (low) and 8 °C (high)

#### Download/ archival software

- Download data via standard computer ports (e.g., USB)
- Graphical presentation of date/time/temperature data
- Display alarm configuration details and total time outside high/low thresholds
- Data export capability (e.g., csv, Excel, txt)

### Selecting a Digital Data Logger Thermometer for Vaccine Temperature Monitoring





# VACCINES FOR CHILDREN



**DCHHS**  
*Safe families, healthy lives.*  
Dallas County Health and Human Services

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## Immunizations Updates

### Meningococcal (MCV4)

For 7<sup>th</sup> – 12<sup>th</sup> grade, 1 dose of quadrivalent meningococcal conjugate vaccine is required on or after the student's 11th birthday.

*Note: If a student received the vaccine at 10 years of age, this will satisfy the requirement.*

### Tdap/Td

For 7<sup>th</sup> grade: 1 dose of Tdap is required if at least 5 years have passed since the last dose of tetanus-containing vaccine.

For 8<sup>th</sup> – 12<sup>th</sup> grade: 1 dose of Tdap is required when 10 years have passed since the last dose of tetanus-containing vaccine. Td is acceptable in place of Tdap if a medical contraindication to pertussis exists.

### Polio (IPV, OPV)

If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age. If only OPV were administered, and all doses were given prior to 4 years of age, one dose of IPV should be given at 4 yrs or older at least 4 weeks after the last OPV dose.

## VIS updates

### Serogroup B Meningococcal (MenB)

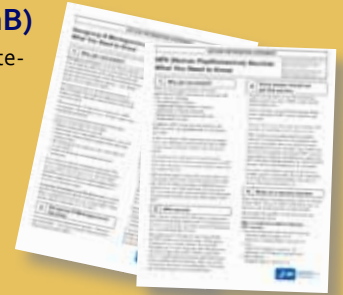
<http://www.cdc.gov/vaccines/hcp/vis/vis-statements/mening-serogroup.html>

(8/9/16) UPDATED

### HPV - Gardasil-9

<http://www.cdc.gov/vaccines/hcp/vis/vis-statements/hpv.html>

(12/2/16) UPDATED



## National Immunization Survey

*Please send us your NIS for research prior to returning the survey to CDC.*



## Ordering Literature

DSHS offers providers various forms, literature, brochures, posters, and vaccine information statements that can be ordered free of charge directly from the DSHS Immunizations Unit at:

<http://www.dshs.texas.gov/immunize/tvfc/ordering-literature.aspx>

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Parts or full contents used within this newsletter were extracted from the publications of the Centers for Disease Control and Prevention and the Texas Department of State Health Services website.



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