

Public Health

Seattle & King County

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HPV Vaccine Restricted To VFC-Eligible Girls

As announced previously, the Washington State Legislature has eliminated Washington State's universal vaccine purchase system. The first step in this transition is the end of state funding for human papillomavirus (HPV) vaccine for non-VFC eligible girls, effective July 1, 2009. Beginning in May 2010, Washington State will provide childhood vaccines only to children meeting eligibility for VFC vaccine. At this time, girls in the following VFC-eligible groups (ages 9-18 years) should continue to receive state-supplied HPV vaccine:

- Enrolled in Medicaid, Take Charge, or one of the state-sponsored health plans (such as Healthy Options, S-CHIP, BHP+, Apple Health)
- Covered by a Family Planning-only coupon
- Unaccompanied minor without insurance information
- Uninsured (no insurance coverage)
- Under-insured (insurance does not cover vaccines, or coverage is capped) NOTE: Patients with private insurance must meet their deductible before being considered under-insured. Some insurance plans limit the amount they will pay toward the cost of immunizations. Insured families do not become under-insured until the cap has been met.
- American Indian or Alaska Native

Teens with a private, commercial insurance plan that will pay for HPV vaccine are NO LONGER eligible for state-supplied HPV vaccine.

For helpful and extensive information about changes to Washington's universal vaccine purchase system, go to www.doh.wa.gov/cfh/immunize/providers/universal.htm.

FDA Makes Change in Labeling of Gardasil

The Food and Drug Administration's (FDA) Center for Biologics Evaluation and Research (CBER) has revised the label for Gardasil (Merck's quadrivalent HPV vaccine). The revised label includes new information in the **Warnings and Precautions** section noting that individuals who faint sometimes have tonic-clonic (jerking) movements and seizure-like activity.

Information on syncope has been in Gardasil's labeling for both healthcare providers and patients since 2007. However, FDA and CDC continue to receive reports of traumatic injuries in individuals who have fainted and fallen after receiving Gardasil. The addition of this information to the **Warnings and Precautions** section is intended to remind healthcare providers that Gardasil recipients should be observed closely for 15 minutes after vaccination. Vaccine recipients should be encouraged to remain seated or lying down for this length of time and be alert for signs and symptoms that can occur before fainting, such as paleness, sweating, nausea, dizziness, ringing in ears, or vision changes.

Syncope has been reported after administration of other adolescent and adult vaccines and medical procedures and is not unique to Gardasil or vaccines. Syncope can also occur with certain medications, after blood donation or in response to pain. Jerking movements, loss of bladder control, and other signs that resemble seizures may occur, but these symptoms do NOT mean that the person is having an *epileptic* seizure. Syncope and its associated signs and symptoms usually last only a short time (seconds to minutes) and resolve when the patient is placed in a position, such as lying down, to restore adequate blood flow to the brain.

Information about this label change may be found on FDA's web site at <http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm165145.htm>. Additional information regarding syncope following vaccination may be found in the May 2, 2008 issue of the *Morbidity and Mortality Weekly Report* at www.cdc.gov/mmwr/preview/mmwrhtml/mm5717a2.htm.

The revised package insert, patient information, and background on the labeling revision can be found at www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm094042.htm.

Please share this important information with your staff. If you have any questions, please contact CBER at 800-835-4709 or ocod@fda.hhs.gov.

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Did you know you can read the *VacScene* newsletter online—and it's available in PDF format so you can print your own copy—about ten days *before* your paper copy arrives in the mail? Go to the link on the right side of the *VacScene* homepage at www.kingcounty.gov/health/vacscene to subscribe to email updates and be alerted when a new issue is available online. Also, if you'd prefer to only read it online, contact us to remove you from the mailing list for a hard copy.



Vaccines For Children

Program News and Alerts

HIB Vaccine Usage Guidelines

As announced in the June 29 Broadcast Fax (#6), providers can resume giving the 4th (booster) dose of Hib vaccine. The following are usage guidelines:

- Do not send out recall notices. Please catch-up children at their next regularly scheduled appointment. The improved supply cannot support a general recall.
- Use ActHIB when a dose of Hib is all that is needed. If DTaP or IPV is also needed, use Pentacel.
- When ActHIB is not available, the CDC (Centers for Disease Control and Prevention) recommends using Pentacel, even when it means the child receives an extra dose of DTaP and/or IPV.
- Children who received a first, second or third dose of Hib at 15 months of age or older do not need a booster dose of Hib vaccine.
- Vaccine requests should cover the number of children a practice reasonably expects to see in a one-month period. Excessive requests will be reduced. In most cases, providers will receive their order as 1/3 ActHIB and 2/3 Pentacel.

Importance of VFC Status Screening

Each and every one of VFC's participating providers should be screening all children for VFC-eligibility. **This is extremely important in order to safeguard Washington State's federal entitlement funding for VFC vaccine purchase.** Providers who cannot show status screening documentation may be suspended from the VFC Program until the screening process is in place and consistently documented.

It's Time to Return Influenza Vaccine

Providers can now return expired, unopened flu vaccine to McKesson Specialty. Go to <http://www.kingcounty.gov/healthservices/health/communicable/immunization/vfc.aspx#providers> and print a copy of the return form OR call VFC at (206) 296-4774 OR email libby.page@kingcounty.gov.

Change in Packaging from McKesson

Effective immediately, McKesson will no longer ship vaccines in returnable/recyclable Styrofoam containers. Providers are encouraged to keep several of the cartons they may already have, to use for transporting vaccine in the event of a power outage or for returning spoiled or expired vaccines to McKesson. Contact Public Health at (206) 296-4774 if you need a prepaid postage label or if you have questions.

Did you know... about Vaccine Information Statements?

Today there are more ways to obtain Vaccine Information Statements (VIS) electronically than ever before, and providers have found innovative ways to comply with the VIS law while conserving paper...all of which have led to confusion about exactly what a provider's responsibilities are regarding use of VIS.

The legal mandate, as stated in the National Childhood Vaccine Injury Act, is that providers must

- give the appropriate VIS to the recipient or to the recipient's parent or legal representative with each dose of vaccine,
- give the VIS prior to administration of the vaccine,
- give the VIS each time the vaccine is given (not just with the first dose), and
- record the edition date of the VIS (found on the back in either the left or right bottom corner) on the patient's medical record or on a permanent office log (the record should be both permanent and accessible).
Note: When multiple VISs are given for a combination vaccine, record the individual edition dates.

REMINDER: CDC's Annual Immunization Update 2009 is coming!

Join us for a group viewing at the Chinook Building in downtown Seattle on August 6 from 8:30 a.m.-11:30 a.m. A registration flyer has been mailed to VacScene recipients, or download the flyer at www.kingcounty.gov/healthservices/health/communicable/immunization.aspx (look for the tan box on the right sidebar). You can watch the live webcast on your own on July 30th or the archived webcast after July 30th by going to <http://www2a.cdc.gov/phtn/immupdate2009/default.asp>.

Universal Purchase Survey On Its Way

Due to cuts in the state budget, Washington's universal childhood vaccine purchase program will end on May 1, 2010. At that time, state funds will no longer be used to purchase childhood vaccines for children with private health insurance.

We recognize that the discontinuation of the universal vaccine purchase system represents a significant challenge for health care providers. **In the next few weeks, each VFC (Vaccines For Children) enrolled provider will receive a survey from the VFC program.** Your responses will allow us to understand how we can best support you in preparing for the transition. The survey includes questions about your clinic's current immunization practices and your plans for immunizing pediatric patients once universal purchase ends.

We recommend the survey be completed by the person who signed the 2009 VFC provider agreement and the clinic manager. Thank you, in advance, for your participation.

Training Opportunity: "H1N1 and Seasonal Influenza Recommendations for 2009-10"

CDC's "Current Issues in Immunization" net conference program on July 16 featured Dr. Joseph Bresee presenting on "Novel Influenza A (H1N1) Update and Seasonal Influenza Recommendations for the 2009-2010 Season." The program combined a telephone audio conference with simultaneous online visual content and a question and answer segment. The archived program is available through CDC's Current Issues in Immunization web page (<http://www.cdc.gov/vaccines/ed/ciinc/#next>).

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