

IMMUNIZATION UPDATE

The Iowa Immunization Program Newsletter

Spring 2016

Program Highlights

2016 CDC Childhood Immunization Champion

Dr. Jody Murph, Iowa City pediatrician honored as Iowa's Immunization Champion

The Iowa Department of Public Health (IDPH) joins the Centers for Disease Control and Prevention (CDC) in recognizing Iowa's 2016 Immunization Champion, Dr. Jody Murph. This award is presented to Dr. Murph, a pediatrician with the University of Iowa Children's Hospital in Iowa City, Iowa for her exemplary work to promote childhood immunizations.

When Dr. Jody Murph realized only 22% of infants born in Iowa in 2008 received the Hepatitis B (Hep B) vaccine in their first 24 hours, she resolved to improve these rates and promote vaccination within the first 12 hours after birth. She worked with the Iowa Department of Public Health to design a new educational campaign aimed at health care professionals. This campaign encouraged the administration of the Hep B birth dose in the delivery room at the same time the infant receives erythromycin eye ointment and the vitamin K injection. This is now the current protocol in many hospitals around the state, including the University of Iowa Children's Hospital (UIHC).

Dr. Murph also spearheaded a new program at her hospital to protect newborn infants from pertussis. Through this program, the Tdap vaccine is now offered to every woman who received prenatal care or gives birth at UIHC. The mother's partner and other adult household members can also be vaccinated. As an Associate Professor at the University of Iowa, Dr. Murph has lectured on immunizations to medical students, nursing students, public health students, and faculty for many years. She is considered a statewide immunization expert and offers guidance to medical and public health groups at the state level. Dr. Murph has also consulted for the Iowa Department of Public Health on immunization-related issues. For her commitment to improving immunization practices within her hospital and across the state, Dr. Murph is Iowa's 2016 CDC Childhood Immunization Champion.



Jody Murph, MD, MS
Pediatrician and Associate Professor
University of Iowa Children's Hospital
University of Iowa College of Medicine



Birth Dose Honor Roll

We would like to congratulate and acknowledge Iowa's eighth birthing hospital for their inclusion into the Immunization Action Coalition's Hepatitis B Birth Dose Honor Roll:

- Avera Holy Family Hospital, Estherville, IA, reported a coverage rate of 99% from 1/1/2015 through 12/31/2015.



The Hepatitis B Birth Dose Honor Roll was created in July of 2013 to recognize hospitals and birth centers who achieved 90% or greater coverage rate of administering hepatitis B vaccine prior to discharge. To protect newborns from hepatitis B viral infection, birthing institutions who qualify must also implement written policies, procedures, and protocols.

More information about the Hepatitis B birth Dose Honor Roll is available at <http://www.immunize.org/honor-roll/birthdose/>. For questions regarding the Perinatal Hepatitis B Program or the Hepatitis B birth Dose Honor Roll, call Kelli Smith at 1-800-831-6293 ext. 2.

IRIS Update

IRIS Password Reset

The Forgot Password button in IRIS allows users to unlock a disabled account and reset their IRIS password. The password reset functionality requires users to establish security questions and have an email address on file within their IRIS user profile.

When a user clicks the Forgot Password Button, the user must enter the correct Org Code, Username, and Email Address associated with the account. The message, 'A password reset link has been sent to the email address associated with this account' appears. The user must check the email address associated with the account, where a link to reset the password can be found. The link will be available for 24 hours and will navigate to the IRIS page where one of the user's security questions will be displayed. Users will have three attempts to correctly answer the security question before it is locked. After correctly answering the security question, users will be able to reset their password.

Organization Admin Users also have the ability to unlock disabled user accounts and reset user passwords. Users are encouraged to use the Forgot Password button and seek help from their Administrative Users for help resetting passwords and unlocking accounts.

The IRIS website contains a [handout](#) with screen shots and step by step instructions to reset your password. For questions, users can contact the IRIS Help Desk at 800-374-3958.



IRIS Webinars

Mark your calendars for upcoming IRIS Q&A webinars! The webinars allow attendees the opportunity to ask staff questions about all aspects of the IRIS application. Registration links can be found on the [IRIS website](#).

- Wednesday, May 18th, 2:00 PM – 3:00 PM
- Thursday, June 16th, 10:00 AM – 11:00 AM
- Wednesday, July 20th, 2:00 PM – 3:00 PM
- Thursday, August 18th, 10:00 AM – 11:00 AM
- Wednesday, September 21st, 2:00 PM – 3:00 PM

- Thursday, October 20th, 10:00 AM – 11:00 AM
- Wednesday, November 16th 2:00 PM – 3:00 PM
- Thursday, December 15th 10:00 AM – 11:00 AM

VFC Highlights

VFC Site Visits

The VFC Program requires all providers to receive a VFC Compliance Site Visit at least every other year. Immunization Program field staff conduct visits to assess implementation of key VFC program requirements and recommendations.

As part of a VFC compliance visit, field staff review clinic practices to ensure the vaccine management plan is up to date, thermometer/data logger calibration date is current, and temperatures are documented twice daily and include time, date, and name of staff person. If non-compliant practices are encountered during the visit, Immunization Program field staff will provide education, tools or technical assistance to support clinic staff.

Pentacel (DTaP-IPV/ActHib) Supply Delay

The Sanofi Pasteur's Pentacel (DTaP-IPV/Hib) vaccine supply delay continues and is anticipated to last throughout the first six months of 2016. This delay has caused the Iowa Vaccines for Children Program to receive Centers for Disease Control and Prevention (CDC)-determined monthly allocations of Pentacel. The Pentacel allocation is approximately 70% of what is normally distributed each month to satisfy Iowa VFC health care provider demand. In addition, CDC is monitoring single antigen vaccines contained in Pentacel and is providing monthly allocations slightly greater than normal distribution.

When placing vaccine orders for Pentacel, please order accordingly to accommodate the reduced allocation. Orders should be consistent with 70% of the recommend order quantity as indicated in IRIS. Orders for single antigen vaccines may be placed as alternatives to Pentacel. Vaccine orders for Pentacel may be reduced to allow all providers to receive a portion of the Program's vaccine allocation. As necessary, the VFC Program will contact providers regarding vaccine orders to discuss the availability of Pentacel and use of single antigen vaccines.

During this time, single antigen vaccines are available and must be used to avoid missed opportunities to vaccinate. Providers should not borrow vaccine from their private stock to vaccinate VFC-eligible children. The CDC has prepared 'Guidance for Vaccinating Children during the 2015-16 Pentacel Manufacturing Delay', which is available [here](#).

The Immunization Program appreciates your understanding and assistance with this matter. If you have questions regarding vaccine orders, please contact the VFC Program at 1-800-831-6293 ext. 5.

VFC Program-Digital Data Loggers

Per the Centers for Disease Control and Prevention (CDC) requirement, beginning January 1, 2018, all Vaccines for Children providers must use a continuous temperature monitoring device to monitor temperatures of refrigerators or freezers that store VFC vaccines. The CDC also specified federal funds could no longer be used by awardees to purchase thermometers for VFC providers. The Iowa Immunization Program's supply of digital thermometers has been depleted. The Iowa Immunization Program was able to purchase a supply of LogTag TRED30 digital data loggers for VFC providers. Data loggers will be distributed at each VFC site's regularly scheduled VFC site visit beginning in the summer of 2016 and will continue through 2017 until all sites have been visited. If your facility currently uses a different digital data logger, you are not required to use the state supplied data logger.

Each facility will receive a digital data logger for every unit used to store VFC vaccines, one back-up to keep onsite, and at least one docking station to download the data from the data logger to a personal computer (PC) via a USB port. In the interim between when your digital thermometer's certificate of calibration expires and when your site is provided a digital data logger, we recommend sites either recertify the calibration of their existing thermometers, or purchase new digital thermometers or digital data loggers. VFC providers will be responsible for the cost to recalibrate thermometers or purchase new thermometers or digital data loggers.

Thermometers previously supplied by the Iowa Immunization Program may be recalibrated by completing a Calibration/Return Form at Control Company's website at <https://traceable.com/> (under the Resources Tab). Under Product Information, select the 'Returned for' reason "Calibration – As Left Only". In the 'Special Instructions/Comments' section, state you would like a 2-year certification of calibration. Control Company will provide an estimate to recalibrate.

If VFC providers choose to purchase a new thermometer or data logger it must meet the following criteria:

- Have a current and valid certificate of calibration testing. A valid certificate includes:
 - The model number of the device
 - Serial number of device
 - Date of Calibration Testing (report or issue date)
 - Measurement results indicate unit passed test and the documented uncertainty is plus or minus 1°F (0.5°C)
 - Testing was performed by either an ILAC/MRA signatory accredited laboratory, or
 - Calibration testing conforms to ISO 17025

It is further recommended thermometers or data loggers have the following:

- Digital display with current, minimum, and maximum temperatures
- Detachable probe in a buffered material (e.g., glycol, glass beads, etc.)
- Alarm for out-of-range temperatures
- Low battery indicator
- Accuracy of plus or minus 1°F (0.5°C)
- Data loggers - Memory storage of at least 4000 readings
- Data loggers – User-programmable logging interval (reading rate)

Stay tuned for more information on the Iowa Immunization Program's transition to digital data loggers. To ensure you receive all pertinent messages, sign up for the VFC email list by sending a blank email to Join-VFC@lists.ia.gov.

Immunization Question Corner

Q: Does the addition of meningitis B vaccine to the CDC's 2016 Childhood Recommended Immunization Schedule change how we use other meningitis vaccines?

A: Two doses of conjugated meningococcal serogroups A,C,W,Y (MenACWY) vaccines (Menactra, Menveo) are still recommended for all adolescents at age 11-12 and 16-18 years; meningitis B (MenB) vaccine recommended to be used in conjunction with MenACWY. It is recommended the second dose of MenACWY be given at the same time it is permissively recommended to give the MenB vaccine series to adolescents at ages 16-18 years. Both MenACWY and MenB may be given on the same day using different syringes and at different anatomical sites.

Q: I had a patient who came to my office needing his second dose of Bexsero meningitis B vaccine. We only carry Trumenba. Can we finish his series using Trumenba?

A: Doses of Bexsero and Trumenba are **not** interchangeable. The ACIP meningococcal serogroup B vaccine recommendations state the same vaccine must be used for all doses in the MenB series. The clinician needs to complete a series with one or the other vaccine. If a person has already received 1 dose of Bexsero and one of Trumenba, pick a brand and finish a recommended schedule with that brand. Ignore the extra dose of the other product. The next dose in the series (either Trumenba or Bexsero) should be separated from the previous dose of Bexsero by at least 1 month.

Iowa VFC Providers will not be allowed to routinely order both Bexsero and Trumenba. Clinics should determine which vaccine will be routinely ordered for their patient population. The Iowa Immunization Program understands patients may be seen who have started a meningococcal B series with the brand not carried by your clinic. Please contact the Iowa Immunization Program at 1-800-831-6293 ext. 5 to discuss orders for meningococcal B vaccine not routinely stocked by your clinic.

Q: "Meningococcal B, OMV" was listed on a patient's immunization record under Meningitis. Since the two brands of meningococcal B vaccine are not interchangeable, how does a clinic know which vaccine is this?

A: The CDC's National Center of Immunization and Respiratory Diseases (**NCIRD**) developed and maintain the Vaccines Administered CVX code sets used in the electronic transmission of vaccine data from electronic medical records to immunization registries. More than 780 health care provider organizations in Iowa are sending immunizations electronically to IRIS using CVX codes instead of Trade Names. The CVX name assigned to Bexsero is Meningococcal B, OMV. The CVX name assigned to Trumenba is Meningococcal B, recombinant. A series started with meningococcal B, OMV (Bexsero) should be completed using Bexsero. A series started with meningococcal B, recombinant (Trumenba) should be completed using Trumenba.

Q: I know the schedule for Trumenba (meningococcal serogroup B vaccine, Pfizer) is 0, 2, and 6 months. What are the MINIMUM intervals between doses of Trumenba and Bexsero (meningococcal serogroup B vaccine, GSK)?

A: Neither ACIP nor the CDC meningococcal subject matter experts have addressed this issue. Given the lack of guidance, we must assume the routine intervals are also the minimum intervals: for Trumenba, 8 weeks between doses 1 and 2, 4 months between doses 2 and 3, and 6 months between doses 1 and 3; for Bexsero, 4 weeks between doses 1 and 2. It is important to use these intervals when scheduling doses. However, if these intervals are violated, the doses still count and do not need to be repeated.

Q: Our clinic would like to avoid stocking both Tdap and Td vaccines. Is CDC likely to recommend Tdap replace Td in the immunization schedule?

A: Currently, ACIP recommends giving only 1 dose of Tdap to adolescents and adults who have not previously received the vaccine, with the exception of pregnant women, who should be vaccinated during each pregnancy. ACIP is unlikely to recommend routine Tdap revaccination for groups other than pregnant women. Vaccine providers will need to continue to stock Td vaccine to administer to patients who need to complete the full primary 3-dose tetanus and diphtheria series and also to administer 10-year booster doses of Td throughout the lifetime of those who have completed the primary series. If a person who previously received Tdap needs a booster dose of Td (as a routine booster dose or for wound management), it is acceptable to administer Tdap if Td is not available.

Resources

Iowa Department of Public Health, Immunization Bureau Email Lists

The Iowa Immunization Program has several email list serves available to help health care providers receive important and timely immunization related information. Providers can send a blank email to the addresses below to receive updates directly in their inbox.

- VFC List: join-VFC@lists.ia.gov
- Immunization Program List: join-IMMUNIZATION@lists.ia.gov
- IRIS List: join-IRISUSERS@lists.ia.gov

Webinar Series for Pink Book Recasts

Recasts of this webinar series, which presented summaries of sections from the 13th edition of the Pink Book, are available online. Each of the 15 webinar recasts in the series is approximately one hour in length.

Although Continuing Education (CE) credit for the webinars has expired, please visit the [webinar series web page](http://www.cdc.gov/vaccines/ed/webinar-epv/index.html)(<http://www.cdc.gov/vaccines/ed/webinar-epv/index.html>) to view the recasts.

You Call the Shots Modules

You Call the Shots is a web-based training course developed through the Project to Enhance Immunization Content in Nursing Education and Training. Several updated modules are now available, including [Pneumococcal](#), [Human Papillomavirus \(HPV\)](#), [Vaccines for Children \(VFC\)](#), and [Vaccine Storage and Handling](#). Please visit the [You Call the Shots web page](http://www.cdc.gov/vaccines/ed/youcalltheshots.htm)(<http://www.cdc.gov/vaccines/ed/youcalltheshots.htm>) for additional information and other modules. Continuing Education (CE) credit is available for viewing a module and completing an evaluation.