

# VACCINATE ADULTS!

Visit [www.immunize.org](http://www.immunize.org) for up-to-date adult immunization information from the Immunization Action Coalition

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## Prepare Now to Vaccinate Healthcare Workers in the Fall

Take time now to plan your medical setting's healthcare personnel influenza vaccination campaign. For a succinct summary of why staff vaccination is necessary, an outline of CDC's recommendations, and a list of practical online resources, see the one-page handout "First do no harm" on page 8 of this issue of *Vaccinate Adults*.

To get started, gather key staff members to plan, implement, and promote staff vaccination. Then, consult recommendations, toolkits, and educational materials. Here are some:

- Centers for Disease Control and Prevention recommendation: "[Influenza Vaccination of Health-Care Personnel](#)"
- Association for Professionals in Infection Control and Epidemiology: The toolkit "[Protect your patients. Protect yourself](#)" includes a month-by-month planning checklist
- [National Influenza Vaccine Summit website](#): The one-page summaries of various institutions'

best practices for increasing staff vaccination rates include contact information, and the toolkits from state and national organizations offer steps for conducting successful vaccination campaigns

- American Society of Health System Pharmacists: The web-based resource center "[Stop the flu—it starts with you!](#)" includes a toolkit, success stories, and resources for improving staff vaccination rates

### Mandatory policies attain high vaccination rates

During 2009, many healthcare institutions achieved high influenza vaccination rates among staff by instituting mandatory influenza vaccination policies. The policies protect patients' health and safety by requiring employees who refuse vaccination to wear masks or by dismissing such employees. For a list of medical settings with stellar mandatory influenza vaccination policies, see page 9 of this issue.

## Ask the Experts

IAC extends thanks to our experts, William L. Atkinson, MD, MPH, and Andrew T. Kroger, MD, MPH, medical epidemiologists at the National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention (CDC).

### Vaccine questions

**Instead of giving tetanus/diphtheria toxoid and acellular pertussis (Tdap) vaccine to a father-to-be who needed protection against pertussis, we mistakenly gave him tetanus/diphtheria (Td) toxoid. How soon after the Td dose can we give him the dose of Tdap he needs?**

As long as they are younger than age 65 years and at least age 10 years, parents, grandparents, healthcare workers, and all others who have not already received Tdap, and who are close contacts of infants younger than age 12 months, should receive a single dose of this vaccine as soon as possible to protect infants from pertussis. When

giving Tdap to protect infants, one does not need to observe a "minimum interval" between giving Td and Tdap. For example, if you had immediately realized that you had mistakenly given the father-to-be Td instead of Tdap, you could have given him the needed Tdap dose at the same visit at which you gave him the erroneous Td dose.

**CDC recommendations state that the minimum intervals for human papillomavirus (HPV) vaccination are at least 4 weeks between doses #1 and #2, and at least 12 weeks between doses #2 and #3. This adds up to a total of 16 weeks between doses #1 and #3. But the recommendations also say that there must be a minimum of 24 weeks between doses #1 and #3. This doesn't make sense to me.**

When administering HPV vaccine, you must meet ALL the minimum intervals. For example, if you give dose #2 at the minimum interval of 4 weeks after dose #1, you must wait 20 weeks to give dose #3 in order to meet the 24-week minimum interval between #1 and #3. Determination of these minimum intervals was based on extensive discussion with the manufacturers and on data from the HPV clinical trials.

**We mistakenly gave a patient the diluent for Menveo meningococcal conjugate vaccine (MCV4; Novartis) without adding it to the powdered vaccine. Since vaccine is present in the diluent as well as in the powder, what should we do now?**

Menveo's liquid vaccine component (i.e., diluent) contains the C, Y, and W-135 serogroups, and the lyophilized vaccine component (i.e., freeze-dried powder) contains serogroup A. Because the patient

received only the diluent, he or she is not protected against invasive meningococcal disease caused by *Neisseria meningitidis* serogroup A.

Invasive disease with *N. meningitidis* serogroup A is very rare in the United States; it is more common in some other countries, particularly the African meningitis belt. If the patient who received only the C-Y-W135 diluent does not plan to travel outside the United States, the dose does not need to be repeated. However, if the patient plans to travel outside the United States, the dose should be repeated with either correctly reconstituted Menveo, or with a dose of Menactra brand (sanofi pasteur) MCV4. There is no minimum interval between the incorrect dose and the repeat dose.

**We now have two meningococcal conjugate vaccines (MCV4) to chose from—Menactra**

(continued on page 4)

### Immunization questions?

- Call the CDC-INFO Contact Center at (800) 232-4636 or (800) CDC-INFO
- Email [nipinfo@cdc.gov](mailto:nipinfo@cdc.gov)
- Call your state health dept. (phone numbers at [www.immunize.org/coordinators](http://www.immunize.org/coordinators))

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The Immunization Action Coalition's 2 periodicals, *Vaccinate Adults* and *Needle Tips*, and our email news service, *IAC Express*, are packed with up-to-date information.

**Subscribe to all 3 free publications in one place. It's simple! Go to**

[www.immunize.org/subscribe](http://www.immunize.org/subscribe)

## Vaccinate Adults!

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[www.vaccineinformation.org](http://www.vaccineinformation.org)  
[www.izcoalitions.org](http://www.izcoalitions.org)

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# New! IAC's "Handouts" for Patients and Staff on [www.immunize.org](http://www.immunize.org)

If you are a healthcare professional who provides vaccination services, then you are likely aware that the Immunization Action Coalition (IAC) is the go-to spot for translations of Vaccine Information Statements (VISs). Did you also know that IAC has developed hundreds of vaccination-related handouts and fact sheets for patients and healthcare staff? You can find these IAC materials in the newly named section "Handouts" (formerly called "Print Materials") on our website—[www.immunize.org](http://www.immunize.org). Along with the name change, the Handouts section has been restructured to improve access to the breadth and depth of IAC's ready-to-print resources for healthcare professionals and the public.

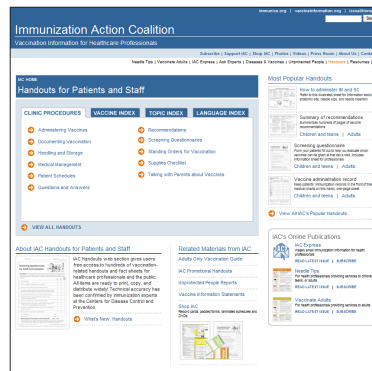
### Free Handouts

[www.immunize.org/handouts](http://www.immunize.org/handouts)

IAC's Handouts web section gives users free access to more than 250 informational materials for healthcare professionals and the public. Many of IAC's most popular pieces are also available in several languages. All are in ready-to-print (PDF) format and have been reviewed for technical accuracy by immunization experts at the Centers for Disease Control and Prevention (CDC).

Designed to give users quick, easy access to IAC's ready-to-print materials, the Handouts section is organized in several ways. Access Handouts using one of these sections:

- **Most Popular Handouts**  
Top 25 downloaded materials
- **Clinic Procedures**  
Handouts for vaccinators
- **Vaccine Index**  
19 Vaccines and VPDs
- **Topics Index**  
Special considerations for immunization
- **Language Index**  
12 languages offered by IAC
- **View All Handouts**  
Sort handouts by title, language, date, and item number



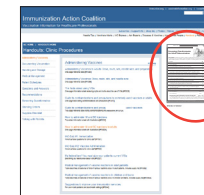
[www.immunize.org/handouts](http://www.immunize.org/handouts)

For users who want a fast route to our most popular handouts, IAC provides links to the pieces visitors to [immunize.org](http://immunize.org) download most frequently—the "Top 25." You'll find links to some of these popular pieces in the right column of the main Handouts page, along with a link to the complete list of the "Top 25."

The **Clinic Procedures Index** provides links to handouts organized by categories such as **Administering Vaccines**, **Documenting Vaccination**, and **Handling and Storage**. The individual sections of the **Vaccine Index** include links to related **Unprotected People Reports** and **VISs**.

The **View All Handouts** table is a complete and sortable listing of our ready-to-print handouts. By clicking the up/down arrows in the column headings, the content of each column can be sorted either in alphabetical order (e.g., by title, language) or in numerical order (e.g., by publication date, item number).

## Get a Preview of IAC's Handouts!



Preview

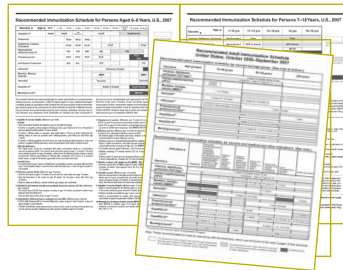
To get a preview of a handout, just place your cursor over the title of the handout, and watch for the preview to appear in the right column.

## Visit the Immunization Action Coalition's website often! [www.immunize.org](http://www.immunize.org)

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## Laminated adult and child immunization schedules Order one of each for every exam room

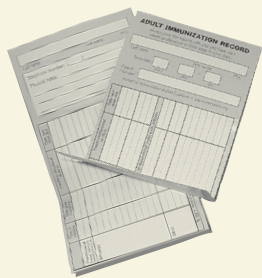
Here are the ACIP/AAFP/ACOG/ACP-approved schedule for adults and the ACIP/AAP/AAFP-approved immunization schedule for people ages 0 through 18 years. Both are laminated and washable for heavy-duty use, complete with essential footnotes, and printed in color for easy reading. The cost is \$7.50 for each schedule and only \$5.50 each for five or more copies.



To order, visit [www.immunize.org/shop](http://www.immunize.org/shop), or use the order form on page 10.

For 20 or more copies, contact us for discount pricing: [admininfo@immunize.org](mailto:admininfo@immunize.org)

## Immunization record cards available for all ages— For adults, for children & teens, and for a lifetime!



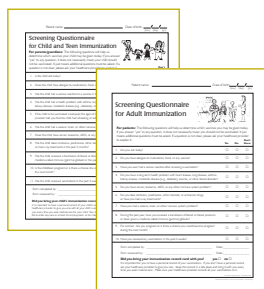
Now you can give any patient a permanent vaccination record card designed specifically for their age group: adult, child & teen, or lifetime. The three cards list all vaccines recommended for each age. The cards are printed on durable rip-, smudge-, and water-proof paper. Wallet-sized when folded, the cards are brightly colored to stand out. To view the cards or for more details, go to [www.immunize.org/shop](http://www.immunize.org/shop) and click on the images.

Buy 1 box (250 cards) for \$37.50 (first order of a 250-card box comes with a 30-day, money-back guarantee). Discounts for larger orders:  
2 boxes \$35 each; 3 boxes \$32.50 each; 4 boxes \$30 each

To order, visit [www.immunize.org/shop](http://www.immunize.org/shop), or use the order form on page 10.

To receive sample cards, contact us: [admininfo@immunize.org](mailto:admininfo@immunize.org)

## Immunization screening questionnaires for contraindications! Now with English on front/Spanish on back; in pads of 100 sheets



Save valuable staff time and make sure your patients are fully screened by using these simple 1-page questionnaires (one for adults, another for child/teen immunization). Patients respond to questions by checking off "yes" and "no" boxes while waiting to be seen. Staff reviews answers during the visit. These pads are priced at \$16 per 100-sheet pad. Prices drop to \$12 each for 2 pads, \$11 each for 3 pads, \$10 each for 4-9 pads. Keep pads at the receptionist's desk, the nurses' station, and in every exam room. To view the pads or for more details, visit IAC's website at [www.immunize.org/shop](http://www.immunize.org/shop).

To order, visit [www.immunize.org/shop](http://www.immunize.org/shop) or use the order form on page 10.

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# Vaccine Highlights

## Recommendations, schedules, and more

*Editor's note: The information in "Vaccine Highlights" is current as of June 21, 2010.*

### Influenza vaccine news

#### Important for the 2010–11 influenza season:

- ACIP recommends annual influenza vaccination for all people ages 6 months and older. To read the provisional influenza vaccination recommendations, go to [www.cdc.gov/vaccines/recs/provisional/downloads/flu-vac-mar-2010-508.pdf](http://www.cdc.gov/vaccines/recs/provisional/downloads/flu-vac-mar-2010-508.pdf).
- CDC encourages providers to begin offering influenza vaccine to people of all ages as soon as it becomes available (usually mid-to-late summer).

On April 30, CDC published ACIP's guidance for use of a high-dose injectable inactivated trivalent influenza vaccine (Fluzone High-Dose; sanofi pasteur). The vaccine, which will be available for

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the 2010–11 influenza season, was licensed as a single dose for use in people age 65 years and older by FDA in Dec. 2009. ACIP has not expressed a preference for Fluzone High-Dose or any specific

licensed inactivated trivalent influenza vaccine for use in people age 65 years and older. To access the ACIP guidance for use of Fluzone High-Dose, go to [www.cdc.gov/mmwr/PDF/wk/mm5916.pdf](http://www.cdc.gov/mmwr/PDF/wk/mm5916.pdf) and see pages 485–486.

### HPV vaccine news

On May 28, CDC published updated recommendations for human papillomavirus (HPV) vaccination of females with bivalent HPV vaccine (HPV2; Cervarix; GSK) and quadrivalent HPV vaccine (HPV4; Gardasil; Merck). Routine vaccination with 3 doses of either HPV2 or HPV4 is recommended for females ages 11 or 12 years and can be started in females age 9 years. Vaccination is recommended for females ages 13 through 26 years who have not been vaccinated previously or who have not completed the 3-dose series. If a female reaches age 26 years before the vaccination series is complete, remaining doses can be administered after age 26 years. Ideally, vaccine should be administered before potential exposure to HPV through sexual contact. To access the updated recommendations, go to: [www.cdc.gov/mmwr/PDF/wk/mm5920.pdf](http://www.cdc.gov/mmwr/PDF/wk/mm5920.pdf) and see pages 626–629.

On May 28, CDC published guidance for human papillomavirus (HPV) vaccination of males with quadrivalent HPV vaccine (HPV4; Gardasil; Merck). The 3-dose series of HPV4 may be given to males age 9 through 26 years to reduce their likelihood of acquiring genital warts. HPV4 would be most effective when given before exposure to HPV

through sexual contact. To access CDC's guidance, go to [www.cdc.gov/mmwr/PDF/wk/mm5920.pdf](http://www.cdc.gov/mmwr/PDF/wk/mm5920.pdf) and see pages 630–631.

### Shingles (zoster) vaccine news

On May 5, CDC updated information about the supply of shingles vaccine (Zostavax; Merck). Zostavax is currently available for order; however, providers will experience backorders, or periods where they are unable to place orders for Zostavax, throughout 2010 and possibly into 2011. For continuing supply information, go to [www.cdc.gov/vaccines/vac-gen/shortages](http://www.cdc.gov/vaccines/vac-gen/shortages).

**Find all IAC's Quick Links at**  
[www.immunize.org/quicklinks](http://www.immunize.org/quicklinks)

**These Quick Links are popular with IAC's web users:**

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## Ask the Experts . . . continued from page 1

*(sanofi pasteur) and Menveo (Novartis). It would be useful to know if they are interchangeable when repeat doses of MCV4 are needed.*

Although both vaccines are licensed for single-dose use, you can use either vaccine to revaccinate people ages 11 through 55 years who are at prolonged increased risk for meningococcal disease. Only Menactra is licensed for vaccinating children ages 2 through 10 years. Use only meningococcal

polysaccharide vaccine (MPSV4; Menomune; sanofi pasteur) when vaccinating or revaccinating people age 56 years and older.

To access updated recommendations for revaccinating people at prolonged increased risk for meningococcal disease, go to: [www.cdc.gov/mmwr/PDF/wk/mm5837.pdf](http://www.cdc.gov/mmwr/PDF/wk/mm5837.pdf), and see pages 1042–43.

**If an adult or child has not had documented chickenpox but has had shingles, is varicella vaccination recommended?**

No. Shingles is caused by varicella zoster, the same virus that causes chickenpox. A history of shingles based on a healthcare provider diagnosis is evidence of immunity to chickenpox. Therefore, a person who has had shingles does not need to be vaccinated against varicella. He/she should still receive zoster vaccine, however, if it is not contraindicated and he/she is age 60 or older.

### Vaccinate Adults correction policy

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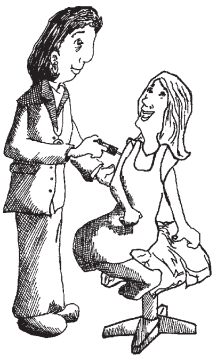
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**Special "Ask the Experts" issues are published five times per year.**

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[www.immunize.org/askexperts](http://www.immunize.org/askexperts)



# Vaccinations for Adults

## You're NEVER too old to get immunized!

Getting immunized is a lifelong, life-protecting job. Don't leave your healthcare provider's office without making sure you've had all the vaccinations you need.

Vaccine <span style="float: right;">Age ►</span>	19–49 years	50–64 years	65 years & older
<b>Influenza</b>	You need a dose every fall (or winter).		
<b>Pneumococcal</b>	You need 1–2 doses if you smoke cigarettes or if you have certain chronic medical conditions.*		You need 1 dose at age 65 (or older) if you've never been vaccinated. You may also need a 2nd dose.*
<b>Tetanus, diphtheria, pertussis</b> (Td, Tdap)	If you haven't had at least 3 tetanus-and-diphtheria-containing shots sometime in your life, you need to get them now. Start with dose #1, followed by dose #2 in 1 month, and dose #3 in 6 months. All adults need Td booster doses every 10 years. If you're younger than age 65 years and haven't had pertussis-containing vaccine as an adult, one of the doses that you receive should have pertussis (whooping cough) vaccine in it—known as Tdap. Be sure to consult your healthcare provider if you have a deep or dirty wound.		
<b>Hepatitis B</b> (HepB)	You need this vaccine if you have a specific risk factor for hepatitis B virus infection* or you simply wish to be protected from this disease. The vaccine is given as a 3-dose series (dose #1 now, followed by dose #2 in 1 month, and dose #3, usually given 5 months after dose #2).		
<b>Hepatitis A</b> (HepA)	You need this vaccine if you have a specific risk factor for hepatitis A virus infection* or you simply wish to be protected from this disease. The vaccine is usually given as 2 doses, 6–18 months apart.		
<b>Human papillomavirus</b> (HPV)	You need this vaccine if you are a woman who is age 26 years or younger. One brand, Gardasil, can be given to men age 26 years or younger to prevent genital warts. The vaccine is given in 3 doses over 6 months.		
<b>Measles, mumps, rubella</b> (MMR)	You need at least 1 dose of MMR if you were born in 1957 or later. You may also need a 2nd dose.*		
<b>Varicella</b> (Chickenpox)	If you've never had chickenpox or you were vaccinated but only received 1 dose, talk to your healthcare provider about whether you need this vaccine.		
<b>Meningococcal</b>	If you are a young adult going to college and plan to live in a dormitory, you need to get vaccinated against meningococcal disease. People with certain medical conditions should also receive this vaccine.*		
<b>Zoster</b> (shingles)			If you are age 60 years or older, you should get this vaccine now.

\* Consult your healthcare provider to determine your level of risk for infection and your need for this vaccine.

**Do you travel outside the United States?** If so, you may need additional vaccines. The Centers for Disease Control and Prevention (CDC) provides information to assist travelers and their healthcare providers in deciding the vaccines, medications, and other measures necessary to prevent illness and injury during international travel. Visit CDC's website at [www.cdc.gov/travel](http://www.cdc.gov/travel) or call (800) CDC-INFO ([800] 232-4636). You may also consult a travel clinic or your healthcare provider.

# Vaccine Refrigerator Setup

## Storing Vaccines

Carefully organizing vaccines in a refrigerator helps protect vaccine and facilitates vaccine inventory management. Refrigerate all vaccines except MMRV, Varicella, and Zoster (store these in the freezer).

### Refrigerator in a Combination Unit

Usable space is limited (inside dashed lines).

✓ Place vaccine in breathable plastic mesh baskets and clearly label baskets by type of vaccine.

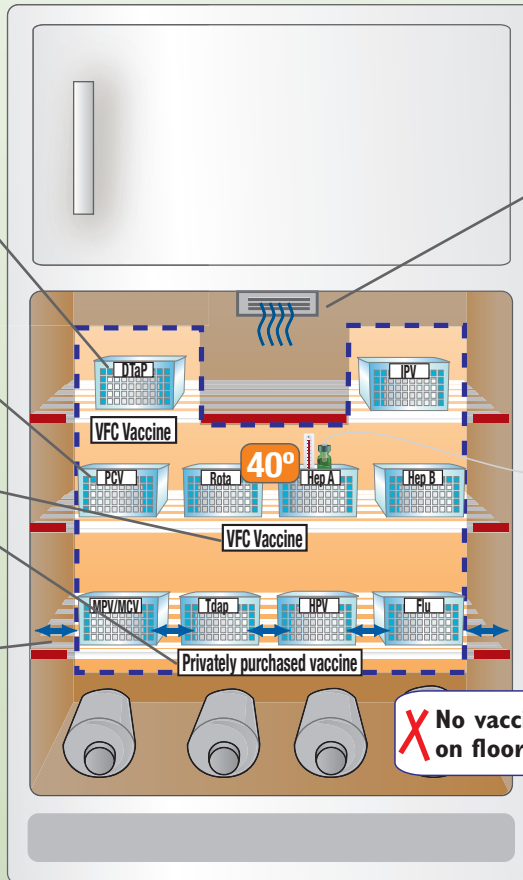
✓ Group vaccines by pediatric, adolescent, and adult types.

✓ Separate the VFC vaccine supply from privately purchased vaccine.

✓ Keep baskets 2-3 inches from walls and other baskets.

✓ Keep vaccines in their original boxes until you are ready to use them.

✓ Store only vaccine and other medication in vaccine storage units.



✗ Keep vaccine away from all cold air vents. The vents blow in very cold air from the freezer which can damage vaccines.

✗ No food in refrigerator.

✗ No vaccine in doors.

✗ No vaccine in solid plastic trays or containers.

✗ No vaccine in drawers or on floor of refrigerator.

✓ Keep vaccines with shorter expiration dates to front of shelf.

If you have vaccine that will expire in 3 months or less that you will not be able to use, notify the VFC Program.

✓ Keep temperatures between 35°F to 46°F.

Aim for 40° F

Below 35°F is too cold! Call VFC.

Above 46°F is too warm! Call VFC.

If you have any problems with your refrigerator, keep the refrigerator door shut and notify your state's VFC Program.

• VFC Program Office

• VFC Field Representative

Adapted with permission from the California Department of Public Health, Immunization Branch.

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You'll find other practical vaccine storage and handling resources at [www.eziz.org/resources/materials\\_storageandhand.html](http://www.eziz.org/resources/materials_storageandhand.html)

# Monthly Care of Vaccine Storage Units

A small amount of regular maintenance is necessary to help ensure that vaccine refrigerators and freezers work properly. Follow the three steps below to keep **household-style** refrigerators and freezers clean. If you have a commercial grade unit, follow the manufacturer's maintenance schedule and other recommendations.

## 1. Clean the inside of the storage units

Cleaning the inside of the refrigerator and freezer will help prevent the growth of bacteria and fungus.

You do not need to remove the vaccine from the unit to clean it. Just move the trays of vaccine as you clean.

### Do not unplug the unit.

- Clean any spills.
- Wipe the inside of the compartment and the shelves with disinfectant or antibacterial wipes. Let it dry.
- Put the trays of vaccine back where they were.



## 2. Check the door seals

Refrigerators and freezers have flexible door seals that prevent cold air from escaping when doors are closed. If the seal does not seal completely, cold air escapes. This can cause temperatures to fluctuate in the unit.

### Do not unplug the unit.

1. Locate the seals.
2. Examine the seals.
  - They should not be torn or brittle.
  - When the unit is closed, there should be no gaps between the seals and the body of the unit.
3. If you suspect a problem with the seals, tell your supervisor.



## 3. Clean the coils

If the coils are easy to reach, use a duster to remove any visible dust.

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You'll find other practical vaccine storage and handling resources at [www.eziz.org/resources/materials\\_storageandhand.html](http://www.eziz.org/resources/materials_storageandhand.html)

# First do no harm

## Protect patients by making sure all staff receive yearly influenza vaccine!

Healthcare employers are not only strongly encouraged to increase their employees' influenza immunization rates, in some instances, their organization's accreditation depends on it! In 2006, the Centers for Disease Control and Prevention (CDC) published vaccination influenza recommendations for healthcare settings, and in 2007, The Joint Commission established influenza infection control standards.

Big changes have taken place in influenza vaccination of healthcare personnel (HCP): The responsibility for increasing the rates of HCP influenza vaccination is rapidly shifting from the employee to the employer.

### What's happened?

**At CDC:** In February 2006, CDC published "Influenza Vaccination of Health-Care Personnel." These recommendations "apply to HCP in acute care hospitals, nursing homes, skilled nursing facilities, physician offices, urgent care centers, and outpatient clinics, and to persons who provide home healthcare and emergency medical services." They were issued jointly by HICPAC (the Healthcare Infection Control Practices Advisory Committee) and ACIP (the Advisory Committee on Immunization Practices). The summary box in the right column presents an overview, including the recommendation that employers vaccinate employees at the work site at no cost. To obtain a copy of the complete recommendations, go to: [www.cdc.gov/mmwr/PDF/rr/rr5502.pdf](http://www.cdc.gov/mmwr/PDF/rr/rr5502.pdf).

**At The Joint Commission:** In January 2007, a new infection control standard of The Joint Com-

mission went into effect. It requires accredited organizations to offer influenza vaccinations to staff, volunteers, and licensed independent practitioners who have close patient contact. The standard is an accreditation requirement for the Critical Access Hospital, Hospital, and Long Term Care accreditation programs.

### Why is it happening?

The short answer is because HCP influenza vaccination rates remain appallingly low, and unvaccinated HCP are infecting vulnerable patients with influenza. Only half of HCP were vaccinated against influenza in the 2008–09 season, even though ACIP has urged annual influenza vaccination for HCP since 1981. Further, influenza transmission has been documented among patients in a variety of clinical settings, and infections have been linked to unvaccinated HCP. Clearly, we are doing our patients harm.

### What should your healthcare facility do to comply?

In the box below are practical online resources healthcare organizations will find valuable in creating influenza vaccination programs for employees.

## Practical resources for vaccinating HCP against influenza

**Centers for Disease Control and Prevention**  
Read "Influenza Vaccination of Health-Care Personnel" at [www.cdc.gov/mmwr/PDF/rr/rr5502.pdf](http://www.cdc.gov/mmwr/PDF/rr/rr5502.pdf).  
Access CDC's Influenza web page: [www.cdc.gov/flu](http://www.cdc.gov/flu)

**National Influenza Vaccine Summit (NIVS)**  
(Co-sponsored by the American Medical Association and CDC). See the NIVS Healthcare Workers home page:  
[www.preventinfluenza.org/professionals.asp](http://www.preventinfluenza.org/professionals.asp)

**The Joint Commission**  
Visit "Strategies for Implementing Successful Influenza Immunization Programs for Health Care Personnel Project": [www.jointcommission.org/PatientSafety/InfectionControl/flu\\_monograph.htm](http://www.jointcommission.org/PatientSafety/InfectionControl/flu_monograph.htm)

**U.S. Dept. of Health & Human Services (HHS)**  
See the HHS "Health Care Personnel Initiative to Improve Influenza Vaccination Toolkit":  
[www.hhs.gov/ophis/initiatives/vacctoolkit](http://www.hhs.gov/ophis/initiatives/vacctoolkit)

**Immunization Action Coalition (IAC)**  
Get these IAC print materials online:

- ♦ "Standing Orders for Administering Influenza Vaccine to Adults"  
[www.immunize.org/catg.d/p3074.pdf](http://www.immunize.org/catg.d/p3074.pdf)
- ♦ "Screening Questionnaire for Injectable Influenza Vaccination"  
[www.immunize.org/catg.d/p4066.pdf](http://www.immunize.org/catg.d/p4066.pdf)
- ♦ "Screening Questionnaire for Intranasal Influenza Vaccination"  
[www.immunize.org/catg.d/p4067.pdf](http://www.immunize.org/catg.d/p4067.pdf)
- ♦ "Declination of Influenza Vaccination" form  
[www.immunize.org/catg.d/p4068.pdf](http://www.immunize.org/catg.d/p4068.pdf)

## Summary of CDC's HICPAC / ACIP Recommendations

The committees that developed and endorsed these recommendations included persons with expertise in infectious diseases, infection control, pediatrics, vaccinology, internal medicine, and public health. The recommendations are as follows:

- **Educate HCP regarding the benefits of influenza vaccination** and the potential health consequences of influenza illness for themselves and their patients, the epidemiology and modes of transmission, diagnosis, treatment, and nonvaccine infection control strategies, in accordance with their level of responsibility in preventing health-care-associated influenza.
- **Offer influenza vaccine annually to all eligible HCP** to protect staff, patients, and family members and to decrease HCP absenteeism. Use of either available vaccine (i.e., inactivated [TIV] or live attenuated influenza vaccine [LAIV]) is recommended for eligible persons.
- **Provide influenza vaccination to HCP at the work site and at no cost** as one component of employee health programs. Use strategies that have been demonstrated to increase influenza vaccine acceptance, including vaccination clinics, mobile carts, vaccination access during all work shifts, and modeling and support by institutional leaders.
- **Obtain a signed declination from HCP who decline vaccination** for reasons other than medical contraindications.
- **Monitor HCP vaccination coverage and declination** at regular intervals during influenza season and provide feedback of ward-, unit-, and specialty-specific rates to staff and administration.
- **Use the level of HCP influenza vaccination coverage as one measure of a patient-safety quality program.**

Visit IAC's  
"Honor Roll for Patient Safety"  
to view stellar examples of  
influenza vaccination mandates  
in healthcare settings at

[www.immunize.org/honor-roll](http://www.immunize.org/honor-roll)

# *Honor Roll for Patient Safety*

*from the Immunization Action Coalition*

*Honoring healthcare institutions with stellar  
influenza vaccination policies*

IAC instituted its Honor Roll for Patient Safety to recognize forward-looking hospitals, professional societies, and government entities that have taken a stand for patient safety by strengthening mandatory influenza vaccination policies for healthcare workers. To date, more than 50 organizations have qualified.



To qualify, an organization must require influenza vaccination for employees, and its mandate must include serious measures to prevent transmission of influenza from unvaccinated workers to patients. Such measures might include a mask requirement, reassignment to non-patient-care duties, or dismissal of the employee.

To read about the policies of the organizations that are included, or to apply for the Honor Roll for Patient Safety, go to [www.immunize.org/honor-roll](http://www.immunize.org/honor-roll).

## *Honorees*

Altru Health (ND) • Battle Creek Health System (MI) • BJC HealthCare • Bronson Methodist Hospital (MI)  
Capital Region Medical Center (MO) • Children's Hospital of Orange County (CA) • Children's Hospital of Philadelphia  
Children's Hospital of the King's Daughters Health System (VA) • Cook County Health & Hospitals System (IL)  
Creighton University • Davidson HealthCare (NC) • Emory Healthcare (GA) • Genesis HealthCare System (OH) • Hoag Hospital (CA)  
Hospital Corporation of America (HCA) • Hospital of the University of Pennsylvania • Infectious Diseases Society of America  
Johns Hopkins Health System (MD) • Kewanee Hospital (IL) • Lakeview Medical Center (WI) • Long Beach Memorial Medical Center (CA)  
Loyola University Health System (IL) • MedStar Health • Michigan State University/Kalamazoo Center for Medical Studies  
Miller Children's Hospital (CA) • Moses Cone Health System (NC) • National Patient Safety Foundation • New York-Presbyterian Hospital  
Orange Coast Memorial Medical Center (CA) • Pacific Hospital of Long Beach (CA) • Petaluma Valley Hospital (CA)  
Saddleback Memorial Medical Center (CA) • Saint Alphonsus Regional Medical Center (ID) • Santa Rosa Memorial Hospital (CA)  
Spectrum Health Hospitals (MI) • St. Joseph Health System (CA) • St. Jude Medical Center (CA) • Swedish Medical Center (CO)  
TriHealth, Good Samaritan and Bethesda North Hospitals (OH) • U.S. Department of Defense • University of California-Davis Health System  
University of California-Irvine Healthcare • Virginia Mason Medical Center (WA) • Waverly Health (IA)

To view the complete list of honorees, which includes medical practices, go to [www.immunize.org/honor-roll](http://www.immunize.org/honor-roll).

# Order Essential Immunization Resources from IAC

*Laminated immunization schedules give you solid information for 2010—order today!*

IAC has two laminated immunization schedules for 2010—one for adults and one for children/teens. Based on CDC's immunization schedules, these laminated schedules are covered with a tough, washable coating. This allows them to stand up to many months of use as at-your-fingertips guides to immunization and as teaching tools you can use to give patients authoritative information. Plus,

each schedule includes a guide to vaccine contraindications and precautions, an additional feature that will help you make on-the-spot determinations about the safety of vaccinating patients of any age.

To order laminated schedules or any of our other essential immunization resources, print out and mail or fax the form below or place your order online at [www.immunize.org/shop](http://www.immunize.org/shop).

**It's convenient to shop IAC online at [www.immunize.org/shop](http://www.immunize.org/shop)**

## Order Essential Immunization Resources

### CD-ROM of IAC print materials

FREE with a contribution of \$75 or more (see below). The CD contains all of IAC's ready-to-print materials in English and any translations available in Spanish. Includes VISs in English and Spanish.

### Laminated U.S. Immunization Schedules

Qty.	(details, p. 3; call for discounts on bulk orders)	Amt.
_____	R2009 Adult schedule: 1-4 copies—\$7.50 each; 5-19 copies—\$5.50 each.....	\$ _____
_____	R2008 Child/teen schedule: 1-4 copies—\$7.50 each; 5-19 copies—\$5.50 each ...	\$ _____

### Padded Questionnaires for Vaccine Contraindications English on one side/Spanish on the other (details, p. 3; call for discounts on bulk orders)

100 sheets/pad; 1 pad—\$16; 2 pads—\$12 each; 3 pads—\$11 each; 4 pads—\$10 each

_____	R4065 Adult screening questionnaire in English/Spanish.....	\$ _____
_____	R4060 Child/teen screening questionnaire in English/Spanish .....	\$ _____

### Patient Immunization Record Cards – (wallet-sized) (details p. 3; call for discounts on bulk orders)

250 cards/box; 1 box—\$37.50; 2 boxes—\$35 each; 3 boxes—\$32.50 each; 4 boxes—\$30 each

_____	R2005 Adult immunization record cards .....	\$ _____
_____	R2003 Child/teen immunization record cards .....	\$ _____
_____	R2004 Lifetime immunization record cards .....	\$ _____

### DVD (call for discounts on bulk orders)

_____	D2020 DVD: Immunization Techniques: Safe, Effective, Caring—\$10.50 .....	\$ _____
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**Subtotal for Purchases \$** \_\_\_\_\_

## Make a Charitable Contribution

I am a  new  renewing contributor.

### Here is my contribution:

- \$25     \$50     \$75     \$100     \$125  
 \$150     \$200     \$250    other: \$ \_\_\_\_\_

As a thank-you gift, I'd like a packet of some of IAC's most popular print pieces.

I'm contributing \$75 or more and would like the additional thank-you gift of a CD containing all of IAC's English- and Spanish-language print materials, plus Vaccine Information Statements in English and Spanish.

IAC is a 501(c)(3) charitable organization and your contribution is tax deductible to the fullest extent of the law.

**Purchases and Contribution Total \$** \_\_\_\_\_

## How to Place an Order

**By Credit Card:** Order easily online at our secure shopping cart at [www.immunize.org/shop](http://www.immunize.org/shop).

**By Check, Purchase Order, or Credit Card:** Print out this page, fill out the necessary information, and

**Fax the page to:** (651) 647-9131 or

**Mail the page to:** Immunization Action Coalition  
1573 Selby Avenue, Suite 234  
St. Paul, MN 55104

**Our federal ID# is 41-1768237.**

**For Questions or International Orders:** Contact us by phone at (651) 647-9009 or email [admininfo@immunize.org](mailto:admininfo@immunize.org)

**Thank you** for your support of the Immunization Action Coalition. We depend on you!

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