



IMMUNICATIONS

Vaccinate at Every Life Stage
Winter 2015

ASIIS Update

By Sanket Solgama, ASIIS Program Manager

The Vaccines for Children (VFC) program is a federally funded program administered by the Centers for Disease Control and Prevention (CDC) to provide vaccines to VFC eligible children throughout Arizona.

Accountability for each VFC vaccine dose is essential for all parties involved, including the CDC, Arizona Department of Health Services Immunization Program Office (ADHS-AIPO), your office and your patients.

In the coming months, ADHS-AIPO will strengthen VFC vaccine reporting requirements in order to improve VFC vaccine accountability. Each VFC vaccine dose must be accounted for within ASIIS. The following actions will help make this possible:

- All VFC vaccine orders must be received in ASIIS once the shipment arrives.
<https://asiis.azdhs.gov/Receiving%20VFC%20Vaccine%20Shipments.pdf>
- All administered VFC vaccine doses must be recorded in ASIIS using the “Add Administered” function and selecting a vaccine on the Vaccination Detail Add screen. This will ensure accurate linkage between the patient and the VFC vaccine that was administered.
<https://asiis.azdhs.gov/Reporting%20Administered%20Immunizations.pdf>
- Regularly (daily or weekly), reconcile your ASIIS inventory to account for any wasted, spoiled or expired VFC vaccine.
<https://asiis.azdhs.gov/Inventory%20Reconciliation.pdf>
- Usage of “administered but not linked to a vaccine” will **not** be an allowable reason for VFC vaccine reconciliation.

All training modules are available for your review at:

<http://www.azdhs.gov/phs/asiis/support.htm>

Additionally, the ASIIS Support team is available to assist you in meeting these requirements. You can reach them via email ASIISHelpDesk@azdhs.gov or phone 602-364-3899 or toll-free 877-491-5741.

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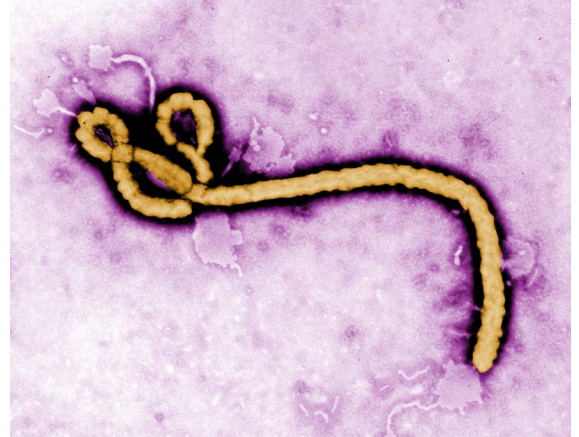
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Ebola Preparedness Activities at ADHS

By Jessica Rigler, MPH, Bureau Chief, Bureau of Epidemiology and Disease Control

While there are no Ebola cases in Arizona at this time, infectious disease is only a plane ride away. Here at ADHS, we've activated our Health Emergency Operations Center (HEOC) to work on Ebola preparedness and support a coordinated response in the event we do get a case in Arizona.

HEOC activation occurs throughout the year for preparedness exercises and for real world events like wildfires, floods, and large disease outbreaks. This allows employees across multiple units within ADHS to work under an incident command structure to ensure coordination throughout the agency. For the Ebola preparedness response, our HEOC is staffed by folks from Emergency Preparedness, Epidemiology, Emergency Medical Services, State Laboratory, Behavioral Health, Licensing, Procurement, Information Technology, and Public Information. In this case, we're operating virtually, which means that those involved in the HEOC continue to complete their day-to-day tasks, while using email and a system called WebEOC to communicate about Ebola activities. Any Ebola-related activities are approved through the HEOC chain of command to ensure that all messages contain the same overarching information no matter what unit in the agency originates them.



Through HEOC coordination, we have launched our Ebola preparedness website, azhealth.gov/ebola, which is frequently updated with toolkits and guidance documents for public health, healthcare, and community partners.

The most important element in preventing an outbreak of Ebola is rapid identification of all suspect cases. Travelers returning from Ebola-affected countries (Guinea, Liberia, Mali, and Sierra Leone) are routed through one of five US airports where they are screened for Ebola and provided with a thermometer to monitor their temperature. Our federal partners notify ADHS of those travelers coming to our state. Local public health departments actively monitor these returning travelers for 21 days from their departure from West Africa. This ensures the public health system's ability to rapidly identify the most likely Ebola cases at symptom onset so they can be appropriately isolated, tested and treated to reduce the risk of exposure to the greater community.

Healthcare facilities play a critical role in rapid identification of suspect Ebola cases through screening. All healthcare facilities must be prepared to screen, isolate, and coordinate with public health for a suspect Ebola case. Screening tools on azhealth.gov/ebola list questions healthcare providers should ask all patients and provide contact information so public health can be immediately notified if anyone meets screening criteria. If public health determines a patient meets testing criteria for Ebola, a specimen can be tested at the Arizona State Public Health Laboratory.

The Governor's Council on Infectious Disease Preparedness and Response has facilitated identification of Infectious Disease Treatment Centers for Excellence, where Ebola cases can be appropriately treated. Guidance to support treatment centers and other healthcare providers encountering suspect Ebola patients is available on azhealth.gov/ebola/.

Arizona currently has no Ebola cases. Through coordination of information and resources between public health and healthcare partners, we are prepared to rapidly identify and appropriately treat any Ebola cases and to reduce the risk of spread in the community.

Interoperability Update

By Terry Rinck, ASIIS Technical Coordinator

The Arizona State Immunization Registry has been diligently working to interface with providers across the state via HL7 2.5.1. With over 100 organizations accounting for more than 700 facilities now reporting to ASIIS using HL7 messaging we are well underway to automating the immunization reporting process.

Once an organization goes live with HL7 reporting, there are savings realized due to staff no longer having to manually report administered immunizations in ASIIS as well as administered doses automatically decrementing from the ASIIS inventory. An up-to-date ASIIS inventory makes the ordering process go much smoother. In order to realize these benefits, several things have to happen during the interfacing process, such as insuring all the data reported meets the Registry guidelines.

(Continued on next page)

Interoperability Update (continued)

This will insure quality reporting. Some of the Registry guidelines may seem minor, yet when overlooked, they can have negative repercussions. For example, when chart numbers are reused within the same organization this can potentially merge the two patients with the same chart number. When VFC eligibility status is not included, the administered dose may not decrement from the correct vaccine lot in the ASIIS inventory. If an invalid lot number is sent, the administered dose will not be subtracted from the ASIIS inventory. If the guardian information for patients 18 and under is missing, the patient's ASIIS record is incomplete.

Other benefits to timely and complete reporting relate to the ability to quickly identify recipients of specific lot numbers if a recall were to occur. To learn more about interoperability and interfacing with the Registry, plan to attend the "Interoperability - What the HL7 is That?" workshop session during the 22nd Annual Arizona State Immunization Conference April 22 & 23, 2015. This workshop will cover the basics and the process for interfacing your EMR/EHR with ASIIS. For more information visit the following web address: <https://app.azdhs.gov/phs/asiis/ehrinteroperability/ASIIEHRInteroperability.aspx>

If you have any questions or you are ready to register for an interface now, simply fill out the Initial Interest Form found on this page and email it to ASIIS_Group1@azdhs.gov.



Get Recognized for Excellence in Immunization Coverage

By Alexandra Bhatti, MPH, JD*, Immunization Assessment Manager

The Arizona Immunization Program partners with the state's coalition, The Arizona Partnership for Immunization (TAPI), to present the TAPI Teen Award to vaccine providers who achieve 90% coverage with the recommended teen vaccination series. The vaccine providers who receive the TAPI Teen Award will be recognized at the annual awards dinner in April 2015. Nomination forms for the award can be found on the TAPI Provider page at <http://www.whyyimmunize.org/for-providers/>.

The 2015 TAPI Teen Award will be given to providers that reach 90% coverage for a series of 1 Tdap, 1 MCV, and 2 HPV vaccines for 15 year old patients. In 2016, an additional dose of HPV vaccine will be added to the required series for award eligibility to total 3 HPV vaccine doses.

The process by which a provider may receive the award is as follows: a practice will be nominated, or self-nominate, for the TAPI Teen Award, after which the Arizona Immunization Program Office (AIPO) will conduct an immunization assessment of the provider's 15 year old patients born in 1999. AIPO will utilize the Arizona State Immunization Information System (ASIIS) to attain the immunization data and analyze whether the provider has reached at least 90% coverage level for the recommended adolescent series. Now is the time for providers who are interested in receiving the TAPI Teen Award to recall patients who are missing doses of Tdap, MCV, or HPV vaccine. Nominated practices must have a minimum of 20 active patients with immunization records in ASIIS.

TAPI and AIPO also recognize providers with 90% or higher coverage for the recommended toddler series of 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B, and 1 Varicella. The Daniel T. Cloud Toddler Award is dedicated to recognizing excellence in toddler immunization. To be eligible for this award, providers must have at least 25 active patients born in 2012 within ASIIS. As with the TAPI Teen Award, if providers are interested in being awarded the Daniel T. Cloud Toddler Award, it is not too late to check the status of patients born in 2012 and recall them now if they are missing any doses within the series.

For any additional questions regarding the assessment process for the TAPI awards, contact Alexandra Bhatti, Immunization Assessment Manager at: Alexandra.Bhatti@azdhs.gov



Guest Shots

In order to represent different viewpoints from around the state we have established the “Guest Shots” section. Each quarter we will have contributing writers or interviews from

immunization professionals across the state. This quarter we would like to introduce Dr. Miran Song.

Dr. Miran Song received her medical degree from Albany Medical College and has been in practice as a pediatrician for 18 years. She began her career on the Navajo Reservation in 1999 in Kayenta, AZ, remaining there for 10 years before moving to Tuba City. She currently works at Tuba City Regional Health Care Corporation (TCRHCC) where they provide outpatient, inpatient, and newborn nursery care. She enjoys being the literacy advocate and being able to give each child a book at each of their clinic visits. Dr. Song is representing TCRHCC as they were recently recognized as a winner for the Hepatitis B Birth Dose Honor Roll.

Congratulations! You are the first hospital in Arizona to be named to the Hepatitis B Birth Dose Honor Roll. What process did you go through to achieve this?

Thank you. We are very excited to hear this. We have a Pediatrician who works as a liaison between the Pediatric and OB/Nursery Departments. The two departments work as a team to implement new policies and procedures. We have pre-printed Newborn Admission Orders that include the hepatitis B vaccine prior to discharge, so the provider is constantly reminded to give the vaccine.

What would you say attributed to your success?

We are lucky to have a cooperative and cohesive Pediatric/OB team. We review our immunization rates quarterly and devise strategies on how to improve our rates. We are also fortunate to have an extremely low rate of vaccine refusal.

What is your personal view of the importance of immunizations?

Immunizations are the cornerstone of pediatric care. We strive to have all children fully immunized in our service area. Immunizations are given at routine well child exams as well as at sick visits. We have seen a tremendous decline in many vaccine preventable diseases as a direct effect of our immunization efforts.

Why do you think the birth dose is important for all infants?

The first hepatitis B vaccine is a great opportunity for parents to learn how immunizations can protect their child from serious illnesses. The hepatitis B vaccine is considered to be a necessary step in the evaluation and care of the newborn and can prevent acute and chronic infection and the lifelong consequences of cirrhosis and cancer.

Was it hard for parents to understand the importance of receiving the hepatitis B birth dose?

Our parents are accepting of the hepatitis B vaccine. Many families have witnessed the tragedies caused by vaccine preventable diseases and do not want their child to experience them.

Were there any challenges that you expected, that turned out to be surprisingly easy?

We are in the process of becoming a Baby Friendly Hospital. After birth, the infant is placed directly on the mother’s chest for skin-to-skin contact and the first breastfeeding. They are to be undisturbed for at least an hour. Usually the baby was taken to the nursery, washed, weighed, and given erythromycin eye ointment and the hepatitis B vaccine shortly after birth. I was concerned that with the change in flow, something might be missed. The nursery nurses have done a fabulous job in incorporating the Baby Friendly Hospital Initiatives and maintaining our standards of care.

Do you have any advice for other hospitals that might want to apply for the birth dose honor roll?

It is important to have frequent and open communication with the OB/Nursery staff. If the whole team understands the importance of vaccines, you can coordinate your care so that both departments’ goals are met.

For more information on the Immunization Action Coalition Birth Dose Honor Role, go to:

<http://www.immunize.org/honor-roll/birthdose/>

To access the IAC’s guide to “Hepatitis B: What Hospitals Need to Do to Protect Newborns” go to:

<http://www.immunize.org/protect-newborns/>

To access the Arizona Department of Health Perinatal Hepatitis B Prevention Manual go to:

<http://azdhs.gov/phs/immunization/perinatal-hepatitis-b.htm>



2013 CDC PPHF HPV Grant Update

By Michelle Hanson, RN, MPH, Special Programs Manager

Arizona is one of 12 states awarded the 2013 Centers for Disease Control and Prevention (CDC) Prevention and Public Health Fund (PPHF) HPV grant. The purpose of the grant was to increase knowledge, awareness, and use of HPV vaccination which prevents many types of cancers and genital warts. This summary will highlight HPV grant activities performed since the last update.

A total of approximately 360 adolescent AFIX site visits have occurred during the HPV grant period that began October 2013. Site visits provide an opportunity to not only share coverage levels for recommended adolescent vaccinations including HPV with the provider, they also serve as educational opportunities on how to increase coverage rates through utilizing technologies such as Arizona State Immunization Information System (ASIS), implementing reminder recall efforts, introducing communication strategies and more. Provider offices are also able to select quality improvement strategies to work towards within their office that will assist in increasing coverage levels.

Each provider office that received an AFIX site visit will receive a follow up assessment six months later to assess whether immunization coverage levels have increased, and if providers have implemented quality improvement strategies that were selected during the initial site visit. While follow up assessments are still underway, preliminary data indicates that there is a notable increase in coverage and decrease in missed opportunities at provider sites between the initial and follow up assessment. Alexandra Bhatti, the Immunization Assessment Manager, conducted a study to analyze the difference between provider offices within similar geographic areas that received an AFIX visit and follow up and those that did not. Data from this study showed that providers who received an AFIX visit had a larger increase in HPV vaccine coverage rates and experienced a decrease in missed opportunities in both male and female populations; the control population either had no change in missed opportunities or an increase depending on the gender selected.

Dr. Karen Lewis, Medical Director of the Arizona Immunization Program Office, assisted as a speaker at three half-day conferences that dealt with HPV, HPV vaccine, and HPV-related cancers. The lecture series was titled "You Are the Key to Teen Vaccines" and was supported by a grant to the Arizona Chapter of the American Academy of Pediatrics and The Arizona Partnership for Immunization (TAPI). The lectures were given in the three major metropolitan areas in Arizona: in Tucson on June 11, in Flagstaff on July 9, and in Phoenix on July 16. A total of approximately 96 health care providers attended the conferences. Other presenters included county health officers, county public information officers, gynecologic oncologists and pharmacists. The conference covered the burden of HPV infection, HPV-related cancers, inadequate HPV vaccination coverage in Arizona, a review of CDC's HPV campaign and statewide efforts, the importance of a strong provider recommendation for HPV vaccine, and how physicians can engage with the media to help move exam room messaging to parents on their televisions/ radios/ social media feeds.

From July 2014-August 2014, TAPI TIPS (Training on Immunization Practice Strategies) occurred. These were all day immunization trainings provided in 6 geographic regions (outside Maricopa County) for practices participating in the Vaccines for Children Program. Participants included Medical Assistants, Licensed Practical Nurses, Registered Nurses, Physicians Assistants, Nurse Practitioners, Pharmacists and clerical staff. HPV burden of disease and talking to parents about HPV vaccination were core concepts for the training curriculum. Samples of the Protect Me With 3 and Take Control educational materials were included in participant packets.

Gail Hock from TAPI provided a 3 hour workshop at the Arizona Regional Nurse Practitioner Symposium on July 27. HPV burden of disease and talking to parents about HPV vaccination were core concepts in the workshop curriculum. TAPI also had an exhibit table with HPV campaign materials at the symposium.

In Division of Motor Vehicle (DMV) offices around the state, a 30 second HPV vaccine commercial is playing every 15 minutes or 36 times per day. This message has the potential to reach 80,005 people a week.

On November 8, 2014, the National Hockey League, Phoenix Coyotes, Arizona Cancer Coalition, TAPI, and ADHS collaborated on a Hockey Fights Cancer Night. This included a tailgate event with over 100 people and tables with cancer prevention messaging, including HPV vaccination.

A "Protect Me With 3" advertising campaign has been taking place around the state, with on-line ads, banners, and posters. The message is that parents of 11-12 year olds can protect their children from disease with 1 dose of Tdap vaccine, 2 doses of Meningococcal vaccine, and 3 doses of HPV vaccine. A similar message to adolescents is "Take Control, with 3 Vaccines to Protect Me." To obtain flyers or posters, go to <http://www.whyimmunize.org/for-providers/hpv-vaccine-resources/>.

Adolescent health information for teens is also provided on the T2X website at <http://www.t2x.me/>.



Encouraging vaccines is as easy as



Learn more about the new campaigns to help you increase Tdap, Meningococcal and HPV vaccination in children 11-18.



Summary of Reportable Vaccine-Preventable Diseases January–November, 2014^{1,2}

By Askari Addison, MS, MPH, & Susan Goodykoontz, Vaccine-Preventable Disease Epidemiologists

	JAN.–NOV., 2014	JAN.–NOV., 2013	JAN.–NOV. 5-YEAR MEDIAN
Measles	0	1	1
Mumps	9	1	3
Rubella (Congenital Rubella Syndrome)	0 (0)	0 (0)	0 (0)
Pertussis (confirmed)	436 (244)	1,381 (1,042)	798 (137)
<i>Haemophilus influenzae</i> , serotype b invasive disease (<5 years of age)	0 (0)	3 (3)	3 (1)
Meningococcal infection, invasive	9	11	13
<i>Streptococcus pneumoniae</i> , invasive	626	725	707
Hepatitis A	32	70	66
Hepatitis B, acute	53	49	134
Hepatitis B, chronic	1,156	776	807

¹ Data are provisional and reflect case reports during this period.

² These counts reflect the year reported or tested and not the date infected.



The 22nd Annual Arizona Immunization Conference will be held April 22nd & 23rd at the Black Canyon Conference Center in Phoenix, Arizona.

The goal of the 22nd Annual Arizona Immunization Conference is to present the most up-to-date immunization information to our community partners and providers. Because immunizations are one of the most effective measures for protecting the health of Arizona communities, it is important for health professionals to unite for immunization-related issues. This year's topics include, but are not limited to: CDC Immunization Update; Improving

Daily Life with ASIIS; Emerging Infectious Diseases: Arizona, the United States, and the World; Things You Wish You Knew About Vaccines for Children (VFC); School and Childcare Immunization Requirements; To Err is Human, Not to Err is Better; and Empowering Parents to Become Vaccine Advocates. Registration for each day includes breakfast, lunch, refreshments and two snack breaks, as well as the conference booklet. At the completion of each day CEU certificates and certificates of attendance will be available. For more information please see <http://azhealth.gov/phs/immunization/conference.htm>.

ADHS Partner Highlight: Childhood Lead Poisoning Prevention Program

By Amber Asburry, MPH, Office of Environmental Health

The Office of Environmental Health received a three year grant to continue progress towards eliminating lead poisoning in Arizona. Lead poisoning is entirely preventable. However, almost 800 children have elevated blood lead levels annually. Lead has adverse effects on almost all organ systems in the body. Even at low levels, children's intelligence, hearing, and growth can be irreparably damaged. The Childhood Lead Poisoning Prevention Program (CLPPP) uses a targeted screening approach to identify children most at risk for lead poisoning. All children living in high-risk zip codes should receive a blood lead test at 12 months and again at 24 months. Children living outside of the high-risk zip codes should have a lead questionnaire completed to determine if they have been exposed to lead. Please visit us at www.azhealth.gov/lead to find our new two-page screening guide for health professionals and targeted screening plan, which include a list of high-risk zip codes and the lead questionnaire. Please contact CLPPP if a child is found to have elevated blood lead levels or if you have questions about our program at (602) 364-4676.

(Continued on next page)

ADHS Partner Highlight: Childhood Lead Poisoning Prevention Program (continued)

Common Sources of Lead in Arizona



Homes built before 1978 with chipping, peeling or flaking paint, or imported toys with lead-based paint.



Imported spices, such as turmeric, coriander, black pepper, thyme, and hanuman sindoor.



Imported glazed pottery, commonly used to cook beans or hot chocolate.



Home remedies such as *greta* or *azarcon* used to treat stomach illness or *empacho*.



Soil or dust tracked into the house contaminated with lead.



Hobbies such as hunting and fishing that use leaded bullets or fish sinkers; some artist paints and furniture refinishing.



Work in lead-related industries such as construction, mining, welding, or plumbing.

Vaccine Center Update

By Michelle Hanson, RN, MPH, Special Programs Manager

Flu Mist Replacement Program

Because FluMist is a live vaccine, it has a short shelf life. If you have soon-to-expire FluMist, you can take advantage of the FluMist replacement program. The replacement program allows for the replacement of unused, expiring VFC FluMist, at no cost to you. The last day to make replacement requests is January 31, 2015.

How the Program Works:

1. Contact the FluMist® Replacement Program by email (flumistreplacement@mckesson.com) or phone (1-877-633-7375) and provide the number of doses you need replaced, how many boxes you need shipped, and your Provider Identification Number (PIN).
2. Follow all instructions provided to send the expiring doses to the McKesson Specialty Health (MSH) distribution center.
3. Pack the expired/expiring doses and have them ready to ship or be picked up by the carrier the following business day. FluMist does not have to be returned cold.
4. Once the doses arrive at the distribution center, they will be validated against your initial request.
 - a. If the doses received match the request, replacement doses will ship within 72 business hours.
 - b. If the doses received are in excess of the request, only replacement doses that were initially requested will be shipped within 72 business hours.
 - Additional doses received in excess of the request will not be replaced.
 - c. If the doses received are actually less than requested, only the doses received (rounded down to the nearest multiple of 10) will be replaced.
5. Call the Vaccine Center (602-364-3642) about how to categorize the vaccine in ASIIS.

VFC Re-Enrollment

If you re-enrolled in the VFC program in 2014, your enrollment will remain active through December 2015. You will not need to re-enroll for the 2015 VFC program.

VFC Compliance Visits

During your annual VFC compliance visit, your VFC representative will be observing to ensure that "Do Not Shut Off" stickers are placed on or near breaker boxes, that your vaccine management plan is up to date, and that you have a VFC back-up contact in case the primary VFC coordinator is not available. Please ensure that your thermometer calibration date is current and that your thermometer is encased in glycol.

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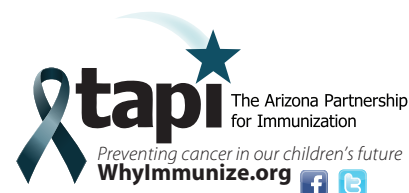
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Arizona Immunization Program Office at (602) 364-3630
or 1-800-376-8939 (State TDD/TYY Relay)

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Is It Influenza or Could It Be Measles?

Influenza and measles are viruses that both cause respiratory symptoms. The typical measles rash does not appear for 2-4 days, so during influenza season, symptoms of early measles can be confused with influenza.

Symptoms and History	Influenza	Measles
Recent international travel or contact with an international traveler	Rare	Frequent
Fever	High (102-104°F) lasting for 3-4 days	Begins low and gradually rises to high (103-105°F)
Red, Watery Eyes (Conjunctivitis)	Uncommon	Begins 2-4 days before rash starts
Runny Nose, Nasal Congestion	Common	Begins 2-4 days before rash starts
Severe Cough	Common	Begins 2-4 days before rash starts
Tiny, white spots inside the mouth (Koplik spots) accompanied by reddened buccal mucosa	Not present	Present along with fever and other symptoms before the rash begins
Red, Maculopapular Rash	Uncommon. If rash occurs, it does not have measles' typical head → foot progression	Appears 2-4 days after above symptoms. Starts first on the face and upper body
Generalized Aches and Pains	Rapid onset, often severe	Common
Fatigue, Malaise, Exhaustion	Rapid onset, often severe	Common
Pharyngitis	Common	Common
Vomiting or Diarrhea	Occasionally	Diarrhea can be a complication
Otitis media	Can be a complication	Can be a complication
Eyes sensitive to light	Not typical	Commonly accompanies conjunctivitis

Your Baby's First Vaccines

What You Need to Know

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

Your baby will get these vaccines today:

- DTaP Polio
 Hib PCV13
 Hepatitis B

(Provider: Check appropriate boxes.)

1 Why get vaccinated?

These vaccines can protect your baby from 7 childhood diseases:

1. Diphtheria

Signs and symptoms include a thick coating in the back of the throat that can make it hard to breathe.

Diphtheria can lead to breathing problems, paralysis and heart failure.

- About 15,000 people died each year in the U.S. from diphtheria before there was a vaccine.

2. Tetanus (Lockjaw)

Signs and symptoms include painful tightening of the muscles, usually all over the body.

Tetanus can lead to stiffness of the jaw that can make it difficult to open the mouth or swallow.

- Tetanus kills 1 person out of every 5 who get it.

3. Pertussis (Whooping Cough)

Signs and symptoms include violent coughing spells that can make it hard for an infant to eat, drink, or breathe. These spells can last for several weeks.

Pertussis can lead to pneumonia, seizures, brain damage, or death.

4. Hib (*Haemophilus influenzae* type b)

Signs and symptoms can include fever, headache, stiff neck, cough, and shortness of breath. There might not be any signs or symptoms in mild cases.

Hib can lead to meningitis (infection of the brain and spinal cord coverings); pneumonia; infections of the blood, joints, bones, and covering of the heart; brain damage; and deafness.

- Before there was a vaccine, Hib disease was the leading cause of bacterial meningitis in children under 5 years of age in the U.S.

5. Hepatitis B

Signs and symptoms include tiredness, diarrhea and vomiting, jaundice (yellow skin or eyes), and pain in muscles, joints and stomach. But usually there are no signs or symptoms at all.

Hepatitis B can lead to liver damage, and liver cancer. Some people develop chronic (long term) hepatitis B infection. These people might not look or feel sick, but they can infect others.

- Hepatitis B can cause liver damage and cancer in 1 child out of 4 who are chronically infected.

6. Polio

Signs and symptoms can include flu-like illness, or there may be no signs or symptoms at all.

Polio can lead to permanent paralysis (can't move an arm or leg, or sometimes can't breathe) and death.

- In the 1950s, polio paralyzed more than 15,000 people every year in the U.S.

7. Pneumococcal Disease

Signs and symptoms include fever, chills, cough, and chest pain.

Pneumococcal disease can lead to meningitis (infection of the brain and spinal cord coverings), blood infections, ear infections, pneumonia, deafness, and brain damage.

These diseases are much less common than they used to be. But the germs that cause them still exist, and even a disease that has almost disappeared will come back if we stop vaccinating. This has already happened in some parts of the world. **When fewer babies get vaccinated, more babies get sick.**

Babies usually catch these diseases from other children or adults, who might not even know they are infected. A mother with **Hepatitis B** can infect her baby at birth. **Tetanus** enters the body through a cut or wound; it is not spread from person to person.



Five Childhood Vaccines can protect your baby from these seven diseases:

Vaccine	Number of doses	Recommended ages	Other information
DTaP (diphtheria, tetanus, pertussis)	5	2 months, 4 months, 6 months, 15-18 months, 4-6 years	Some children should not get pertussis vaccine. These children can get a vaccine called DT (diphtheria & tetanus).
Hepatitis B	3	Birth, 1-2 months, 6-18 months	
Polio	4	2 months, 4 months, 6-18 months, 4-6 years	An additional dose of polio vaccine may be recommended for travel to certain countries.
Hib (<i>Haemophilus influenzae</i> type b)	3 or 4	2 months, 4 months, (6 months), 12-15 months	There are several Hib vaccines. With one of them the 6-month dose is not needed.
PCV13 (pneumococcal)	4	2 months, 4 months, 6 months, 12-15 months	Older children with certain health conditions may also need this vaccine.

Your healthcare provider might offer some of these vaccines as **combination vaccines** — several vaccines given in the same shot. Combination vaccines are as safe and effective as the individual vaccines, and can mean fewer shots for your baby.

2

Some children should not get certain vaccines

Most children can safely get all of these vaccines. But there are some exceptions:

- A child who is sick on the day vaccinations are scheduled might be asked to come back for them at a later date.
- Any child who had a life-threatening allergic reaction after getting a vaccine should not get another dose of that vaccine.

A child who has a severe (life-threatening) allergy to a substance should not get a vaccine that contains that substance. Some of these vaccines contain neomycin, streptomycin, yeast, lactose, sucrose, or latex.

Tell your doctor if your child has any severe allergies, or has ever had a severe reaction after any vaccination.

Talk to your doctor before your child gets...

...**DTaP vaccine**, if your child ever had any of these reactions after a previous dose of DTaP:

- A brain or nervous system disease within 7 days,
- Non-stop crying for 3 hours or more,
- A seizure or collapse,
- A fever of over 105°F.

...**Polio vaccine**, if your child has a severe allergy to the antibiotics neomycin, streptomycin or polymyxin B.

...**Hepatitis B** vaccine, if your child has a severe allergy to yeast.

...**PCV13 vaccine**, if your child has a severe allergy to yeast, or ever had a severe reaction after a dose of DTaP (or other vaccine containing diphtheria toxoid), or after a dose of PCV7, an earlier pneumococcal vaccine.

3

Risks of a Vaccine Reaction

Vaccines, like medicines, can cause side effects.

Most vaccine reactions are **not serious**: tenderness, redness, or swelling where the shot was given; or a mild fever. These occur soon after the shot is given and go away within a day or two. They happen with up to about half of vaccinations, depending on the vaccine.

Polio, Hepatitis B and **Hib Vaccines** have been associated only with these kinds of mild reactions.

Other childhood vaccines have been associated with additional problems:

DTaP Vaccine

Mild Problems: Fussiness (up to 1 child in 3); tiredness or poor appetite (up to 1 child in 10); vomiting (up to 1 child in 50); swelling of the entire arm or leg for 1-7 days (up to 1 child in 30) — usually after the 4th or 5th dose.

Moderate Problems: Seizure (1 child in 14,000); non-stop crying for 3 hours or longer (up to 1 child in 1,000); fever over 105°F (1 child in 16,000).

Serious problems: Long term seizures, coma, lowered consciousness, and permanent brain damage have been reported following DTaP vaccination. These reports are rare.

Pneumococcal Vaccine

Mild Problems: Drowsiness or temporary loss of appetite (about 1 child in 2 or 3); fussiness (about 8 children in 10).

Moderate Problems: Fever over 102.2°F (about 1 child in 20).

Problems that could happen after any vaccine:

- Brief fainting spells can happen after any medical procedure, including a vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall.
- Severe shoulder pain and reduced range of motion in the arm where a shot was given can happen, very rarely, after a vaccination.
- Severe allergic reactions from a vaccine are very rare, estimated at less than 1 in a million doses. If one were to occur, it would usually be within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

4

What if there is a serious reaction?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or behavior changes.

Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.
- Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor should file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

5

The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

6

How can I learn more?

- Ask your doctor.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)**
 - Visit CDC's website at www.cdc.gov/vaccines or www.cdc.gov/hepatitis

Vaccine Information Statement (Interim)

10/22/2014

42 U.S.C. § 300aa-26

Office Use Only



Do you qualify for the Hepatitis B Birth Dose Honor Roll? If so, apply today.

The Immunization Action Coalition (IAC) is recognizing hospitals and birthing centers that have attained 90% or greater coverage rates for administering hepatitis B vaccine at birth and have met specific additional criteria. These criteria define the important elements of written birth dose policies aimed at protecting newborns, including when medical errors occur.

Criteria for Inclusion into the Honor Roll

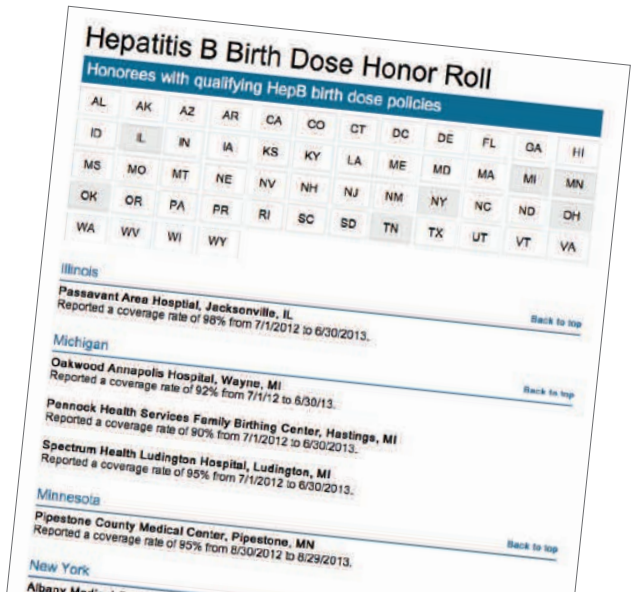
To be included in IAC's Hepatitis B Birth Dose Honor Roll, a birthing institution must have:

- ✓ Achieved, over a 12-month period, a coverage rate of 90% or greater for administering hepatitis B vaccine before hospital discharge to all newborns (regardless of weight), including those whose parents refuse vaccination, and
- ✓ Implemented certain written policies, procedures, and protocols to protect all newborns from hepatitis B virus infection prior to hospital discharge.

To apply for the Birth Dose Honor Roll, visit www.immunize.org/honor-roll/birthdose

Benefits

- Inclusion in online Honor Roll
- Announcement of achievement in nation's largest immunization e-newsletter, *IAC Express*, sent to approximately 50,000 subscribers
- Receipt of beautiful 8.5" x 11" color award certificate suitable for framing
- Peer recognition in the immunization community



Immunization Action Coalition

recognizes the exceptional achievement of

Albany Medical Center

ALBANY, NEW YORK

and enrolls the facility into the

Hepatitis B Birth Dose Honor Roll



for its noteworthy dedication to patient safety by establishing a policy to administer the first dose of hepatitis B vaccine to newborns prior to hospital discharge, and achieving a coverage rate of 99 percent.

The birth dose of hepatitis B vaccine is critical to safeguarding all infants from hepatitis B virus infection which can lead to chronic liver disease.

We applaud your dedication to protecting patients.

Deborah L. Wexler, MD

DEBORAH L. WEXLER, MD, Executive Director

July 16, 2013

A complete list of honorees is available at www.immunize.org/honor-roll/birthdose



The universal hepatitis B vaccine birth dose is supported by leading health organizations

- American Academy of Family Physicians (AAFP)
- American Academy of Pediatrics (AAP)
- American College of Obstetricians and Gynecologists (ACOG)
- Centers for Disease Control and Prevention (CDC)



ASIIS Helpful Tips:

- **VACCINE DOSAGE:** When reporting a pediatric or adult dose of influenza, hepatitis A, or hepatitis B vaccine, be sure to select the vaccine type in ASIIS that matches the dose given.
- **PATIENT SEARCHING:** To minimize the risk of reporting a duplicate patient, a good practice is to first search using only the first letter of the patient's first or last name and the patient's date of birth. This allows for misspellings.
 - If this produces no results that match your patient, try the full first and last name without date of birth before attempting to create a new patient. This allows for potential date of birth errors
 - If you notice a possible duplicate, you can report duplicates to ASIIS for merging
- **ADMINISTERED VS. HISTORICAL:** Know the difference when reporting vaccinations:
 - An administered vaccination is any reported vaccination given by your facility, past or present
 - An historical vaccination is any reported vaccination that is NOT given by your facility.
 - When you are reporting historical vaccinations and are not sure of the specific type of vaccine, it is best not to assume the vaccine type; when in doubt, report the vaccine as unspecified
- **TIMELY REPORTING:** In order to keep ASIIS records as up-to-date as possible, please remember to report administered immunizations at least every 30 days (as required by law for children 18 years and younger)
- **IMPROVING COVERAGE RATES:** AFIX and VFC increasingly rely on ASIIS data to monitor immunization coverage when performing provider assessments. Improve your facility's coverage rate by practicing the following good habits:
 - Report historical vaccinations for your patient to complete their record in ASIIS
 - Mark patients inactive that have not returned after three or more attempts to contact
 - Use the reminder/recall tools in ASIIS to identify children that are missing vaccinations
- **IMPROVING DATA QUALITY:** Data quality has the potential to impact patient care, so please be vigilant with the data you report to ASIIS
 - Data quality checks are being performed on a monthly basis; providers will be contacted if issues are detected
 - If you report to ASIIS electronically, verify that all vaccinations reported are recorded in ASIIS and contact ASIIS if help is needed



CONTACT ASIIS

150 N 18th Ave, Suite 120

Phoenix, AZ 85007

Hotline: (877) 491-5741

Fax: (602) 364-3285

Email: ASIISHelpDesk@azdhs.gov

Honoring the Best Practices & the Brightest Stars

————— 2015 AWARD —————
NOMINATION FORM



Dr. Daniel T. Cloud Outstanding Practice



Big Shots for Arizona



WhyImmunize.org

DR. DANIEL T. CLOUD OUTSTANDING PRACTICE AWARDS

The **ARIZONA PARTNERSHIP FOR IMMUNIZATION (TAPI)** is seeking nominations for the 2015 Toddler and Teen awards. These awards recognize the exceptional efforts of the many individuals and organizations whose tireless work and innovative strategies have improved immunization coverage levels statewide. We look forward to our annual awards banquet as an opportunity to publicly recognize immunization efforts over the past year.

The **TODDLER AWARD** is presented to those practices and clinics that have achieved the highest standard in their practice by reaching a 90% coverage level for 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B and 1 Varicella for two year olds. A minimum of 25 active patients is required. Upon nomination, **ADHS will use ASIIS data to validate coverage levels.**

The **TEEN AWARD** is presented to those practices and clinics that have achieved the highest standard in their practice by reaching a 90% coverage level for 1 Tdap, 1 MCV and 2 HPV vaccinations for 15 year olds. A minimum of 20 active patients is required. Upon nomination, **ADHS will use ASIIS data to validate coverage levels.**

Each Cloud Award recognizes the recipient for 2 full years. Practices may apply for one award each year.

CHECK AWARD: **TODDLER AWARD** **TEEN AWARD**

Nomination Information (Please Print)

Name of Practice/Clinic Being Nominated		A direct line/back line of Practice/Clinic & Contact Name		
Address of Practice/Clinic		City	State	Zip Code
Name of Person Submitting Nomination		Nominator's Direct Line Phone Number		
Nominator's Email Address		Email Address of the Practice/Clinic Being Nominated		

- **QUESTIONS?** Contact TAPI at 602-288-7568.
- Nomination form must be emailed to **Awards@TAPI.org** or mailed/delivered to:
THE ARIZONA PARTNERSHIP FOR IMMUNIZATION
700 E. Jefferson Street, Ste. 100 • Phoenix, AZ 85034
- Print additional nomination forms at **WhyImmunize.org** • *Faxed nominations will not be accepted.*
- Nominations must be received or postmarked by **5 pm on February 27, 2015** to be eligible for consideration.

REVIEW PROCESS FOR CLOUD AND BIG SHOTS APPLICATIONS/NOMINATIONS:

Daniel T. Cloud Outstanding Practice Awards

- Upon nomination, **ADHS will use ASIIS data to validate coverage levels.**

Big Shots for Arizona

- Nomination packet must include: **nomination form, (on page 2), statement and supporting materials.** Nominations will be reviewed by a panel of individuals who represent health care, business, media and civic organizations. Nominators will be contacted if their nominee has been selected.

DEADLINE FOR ALL AWARD CATEGORIES IS FEBRUARY 27, 2015 AT 5:00PM

Big Shots for Arizona Award Categories

Choose the award category that best fits the accomplishments of the nominee or organization that made a difference immunizing babies, kids, teens or adults.

PLEASE SELECT THE BEST CATEGORY FOR YOUR NOMINATION

- BUCK SHOT** **Education Materials & Community Outreach Campaigns** - has produced exceptional printed materials, PSAs, or other forms of communication that have educated the public and health care providers about immunizations.
- LONG SHOT** **Public Policy** - has been responsible for legislation, regulations or public policy initiatives that have helped to reduce barriers to immunization.
- SNAP SHOT** **Special Events Partnerships** - has sponsored/coordinated an event/s that have helped to educate, promote & provide immunizations to Arizonans.
- SPOT SHOT** **Media Coverage** - has produced print, radio or electronic media stories that have helped to educate the public about immunizations.
- HOT SHOT** **Special Achievement** **Public Sector** **Private Sector** - has gone "above and beyond the call of duty" to give tremendous amounts of time and effort to increase immunization coverage levels.
- UP SHOT** **Innovation/New Commitment** - an innovative program or a person new to the immunization effort and has demonstrated commitment to improving the health of Arizonans. In Memory of Andrea Fadok.

PLEASE IDENTIFY THE TYPE OF NOMINEE:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Agency | <input type="checkbox"/> Community Group |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Professional Association |
| <input type="checkbox"/> Individual | <input type="checkbox"/> Other |

YOUR NOMINATION FOCUSES ON:

- | |
|--|
| <input type="checkbox"/> Children (0-10) |
| <input type="checkbox"/> Adolescents (11-18) |
| <input type="checkbox"/> Adults |

BIG SHOTS NOMINATION REQUIREMENTS (check each box after completion):

- Completed nomination form including a direct line to reach the nominator, not a general office line please.
- 3 or fewer double-spaced, typed pages explaining how the nominee has accomplished the award objective. Support materials (i.e.: marketing pieces) may be included.
- A three sentence summary statement to be read at the award ceremony.

Nomination Information (Please Print)

First, Last Name of Nominee (if self nominating) or
Name of Organization

If nominating an organization, provide the name of the person
who will accept the award on behalf of the organization.

Nominee or Organization Address

City

State

Zip Code

Name of Person Submitting Nomination

Direct Phone Number of Nominator

Nominator's Email Address

DEADLINE FOR ALL AWARD CATEGORIES IS FEBRUARY 27, 2015 AT 5:00PM



The Arizona Partnership
for Immunization

700 E. Jefferson Street, Ste. 100
Phoenix, AZ 85034

WhyImmunize.org

2014 TODDLER WINNERS

ALL ABOUT KIDS PEDIATRICS
ARROWHEAD PEDIATRICS – GLENDALE
ARROWHEAD PEDIATRICS – SUN CITY
CANYONLANDS HEALTH CARE – SAFFORD CLINIC
CASA GRANDE PEDIATRICS
CHINLE COMPREHENSIVE CARE FACILITY
CIGNA MEDICAL GROUP – PARADISE VALLEY
CIGNA MEDICAL GROUP – TEMPE
CIGNA MEDICAL GROUP – WESTRIDGE CLINIC
DESERT SHORES PEDIATRICS – CHANDLER
DESERT SHORES PEDIATRICS - GILBERT
EL RIO COMMUNITY HEALTH CENTER
EL RIO COMMUNITY HEALTH CENTER – SW CLINIC
NORTH COUNTRY HEALTH CARE–FLAGSTAFF CLINIC
PINAL COUNTY HEALTH DEPARTMENT - SAN TAN VALLEY
PENDLETON PEDIATRICS
WINSLOW INDIAN HEALTH SERVICE
YAVAPAI COUNTY COMMUNITY HEALTH SERVICES

2014 TEEN WINNERS

ADELANTE HEALTHCARE –BUCKEYE
ADELANTE HEALTHCARE – PHOENIX
ADELANTE HEALTHCARE - SURPRISE
ADELANTE HEALTHCARE - WICKENBURG
CANYONLANDS HEALTH CARE – BEAVER DAM
CANYONLANDS HEALTH CARE – LAKE POWELL
CHINLE COMPREHENSIVE CARE FACILITY
CIGNA MEDICAL GROUP – CHANDLER CLINIC
CIGNA MEDICAL GROUP– SOUTH MOUNTAIN CLINIC

2014 TEEN WINNERS CONT.

CIGNA MEDICAL GROUP – STAPLEY CLINIC
DESERT MISSION
EL RIO COMMUNITY HEALTH CENTER
EL RIO COMMUNITY HEALTH CENTER – NW CLINIC
EL RIO COMMUNITY HEALTH CENTER – SE CLINIC
EL RIO COMMUNITY HEALTH CENTER – SW CLINIC
FOUR CORNERS REGIONAL HEALTH CENTER
LA PAZ COUNTY HEALTH DEPARTMENT
MOUNTAIN PARK – BASELINE CLINIC
MOUNTAIN PARK – EAST CLINIC
MOUNTAIN PARK – GOODYEAR CLINIC
MOUNTAIN PARK – MARYVALE CLINIC
MOUNTAIN PARK – TEMPE CLINIC
NAVAJO COUNTY HEALTH DEPARTMENT
NORTH COUNTRY HEALTH CARE – FLAGSTAFF
PIMA COUNTY HEALTH DEPARTMENT – EAST
PIMA COUNTY HEALTH DEPARTMENT – NORTH
PIMA COUNTY HEALTH DEPARTMENT – SOUTH
SAN SIMON HEALTH CENTER
SAN XAVIER CLINIC
SANTA ROSA HEALTH CENTER
SELLS INDIAN HOSPITAL AND CLINIC
SOUTHWEST PEDIATRICS
SUN LIFE CENTER FOR WOMEN & CHILDREN
TSEHOOTSOOI MEDICAL CENTER
UNIVERSITY OF ARIZONA HEALTH NETWORK – ELKS CLINIC
WHITE RIVER INDIAN HEALTH SERVICE HOSPITAL
WINSLOW INDIAN HEALTH SERVICE