



VFA
California Vaccines
for Adults

VFC
California Vaccines
For Children

CDPH
Immunization
Branch

Catching up on Routine Vaccinations During the COVID-19 Pandemic

California Department of Public Health
Immunization Branch

May 26th, 2021



Housekeeping

Reminder to Panelists:

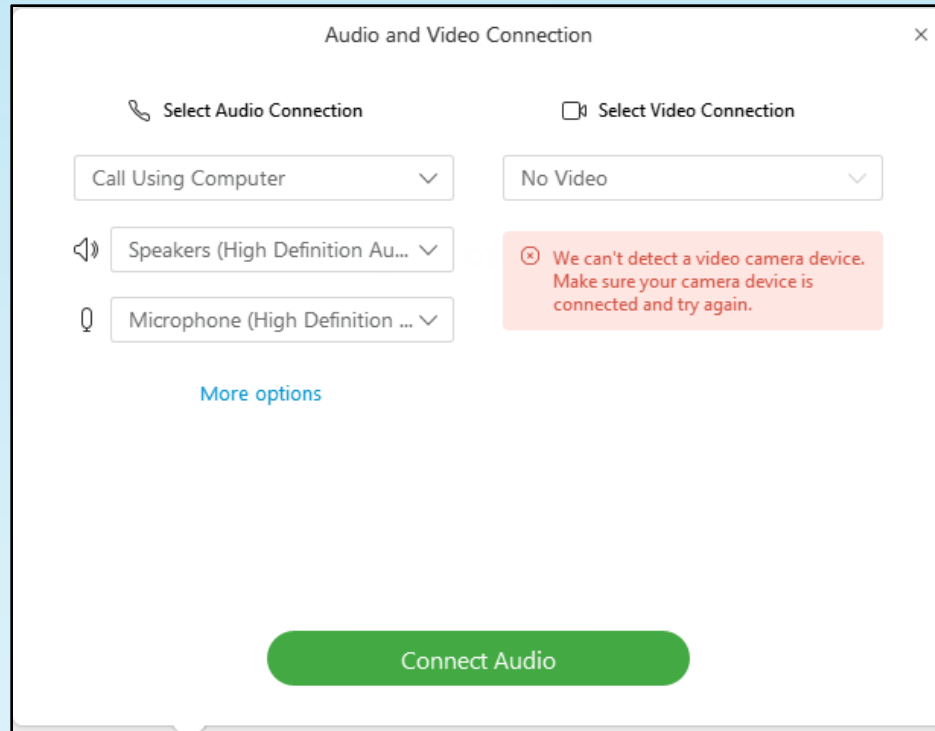
Please mute yourself when not speaking.

Please monitor the Q & A panel for questions you may be able to answer.



Webinar Tech Tips!

1. Listen to today's webinar through the computer audio



Audio and Video Connection

Select Audio Connection Select Video Connection

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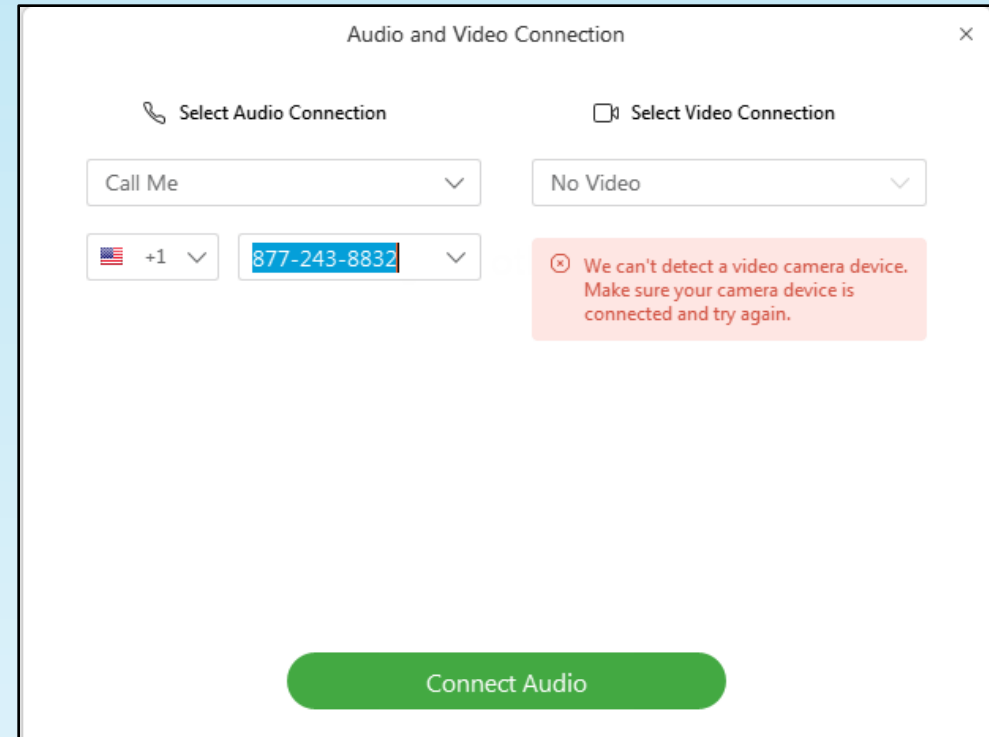
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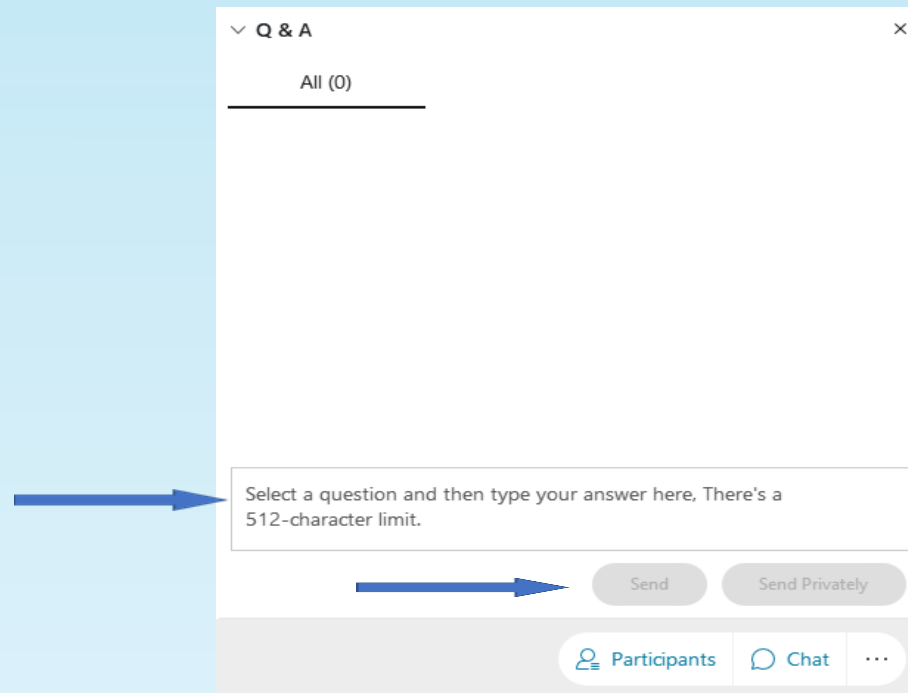
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Connect Audio



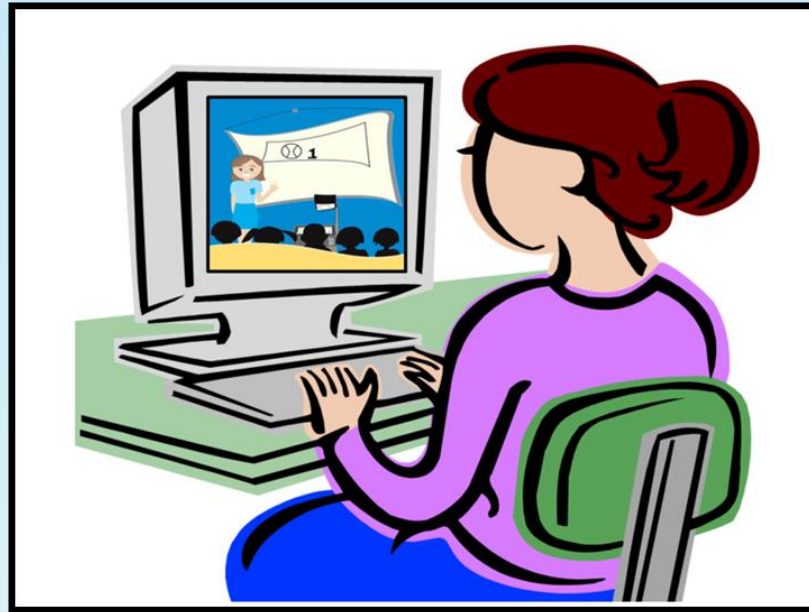
Getting your question(s) and answer(s) submitted

As we move through the presentation, type your comments/questions in the Q&A panel, and click SEND.



In case you have technical difficulties during the webinar, use the email address below for assistance.

Cecilia.LaVu@cdph.ca.gov



Our Presenters Today

Caterina Liu, MD, MPH, Public Health Medical Officer

Jeanette Chapman, Local California Immunization Registry
(CAIR) Representative

Your Host:

Steven Vantine, Educational Consultant, CDPH IZ Branch



Objectives for Today's Webinar:

After this presentation, providers should be able to:

- Identify current immunization rates/trends
- Identify tools and resources to improve immunization rates in your clinic
- Describe the ACIP recommendations for catch-up immunizations
- Utilize CAIR to identify which kids are missing which vaccines



What's the Problem?

Falling Immunization Rates



CDC-MMWR



Fewer childhood vaccines have been given during the COVID-19 pandemic*

To avoid outbreaks of vaccine-preventable diseases and keep children protected, **vaccinations and well-child visits are essential**

*Compared with January-April, 2019

CDC.GOV bit.ly/MMWR5820 MMWR

[Link here](#)



Staying Home has Decreased Immunizations Given in CAIR

California data show dangerous drop in vaccination

- While staying at home during the COVID-19 outbreak has helped to slow the spread of the virus, it also has resulted in delays and decreases in the number of children getting their recommended vaccines.
- Recent data from the California Immunization Registry (CAIR*) show troubling decreases in ordering and administering of childhood vaccines during the COVID-19 pandemic, suggesting that many children may be vulnerable to serious disease.



48%

Drop in vaccination

(0-18 years, April 2020 vs. April 2019)

Children (0-18 years)

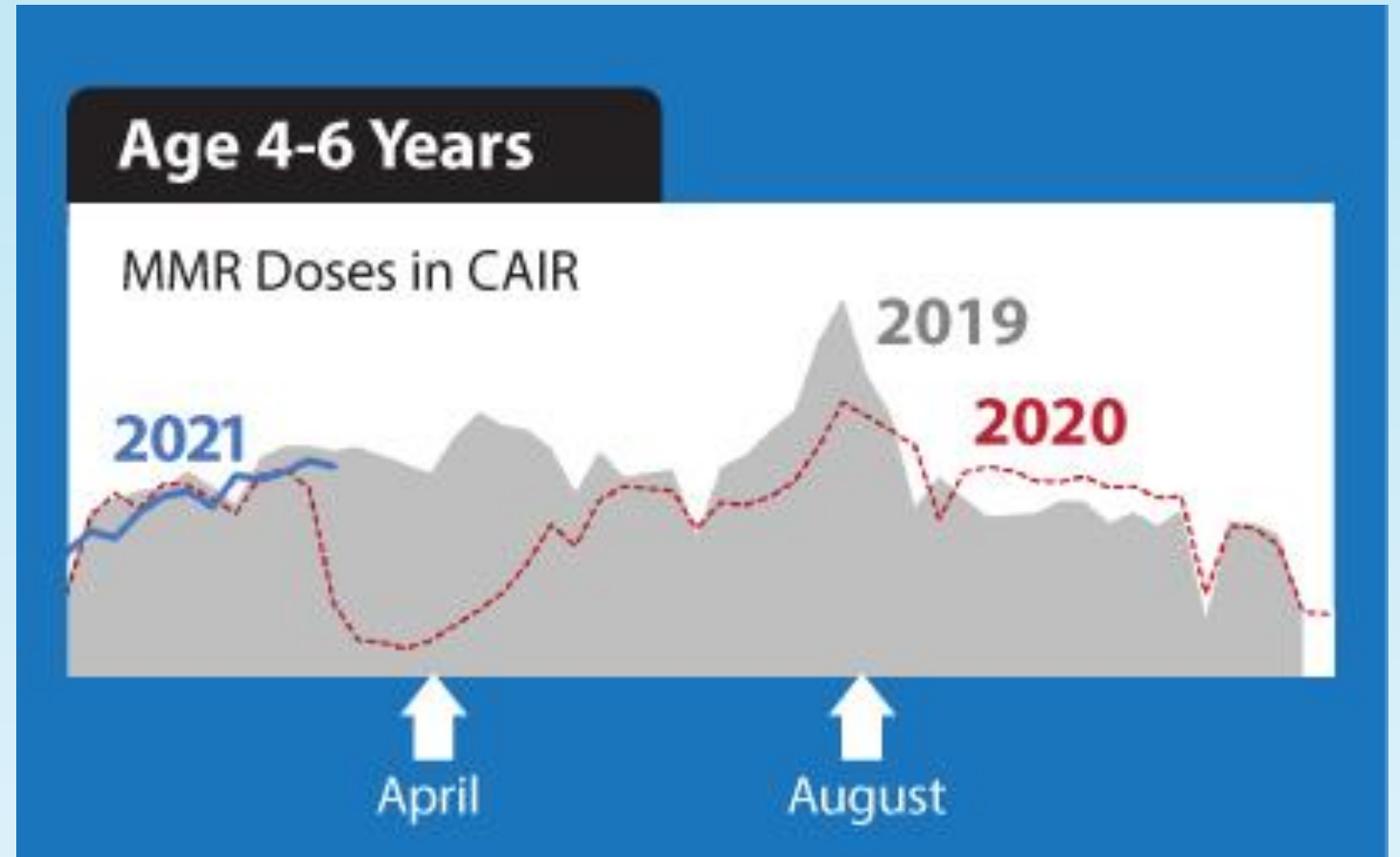
April 2019  849,911 doses

April 2020  442,580 doses



All MMR Doses for Children Ages 4 – 6 years Submitted to CAIR2 By Week, from 2019-present

2020 vs 2019:
MMR ↓19%
Age 4-6 years

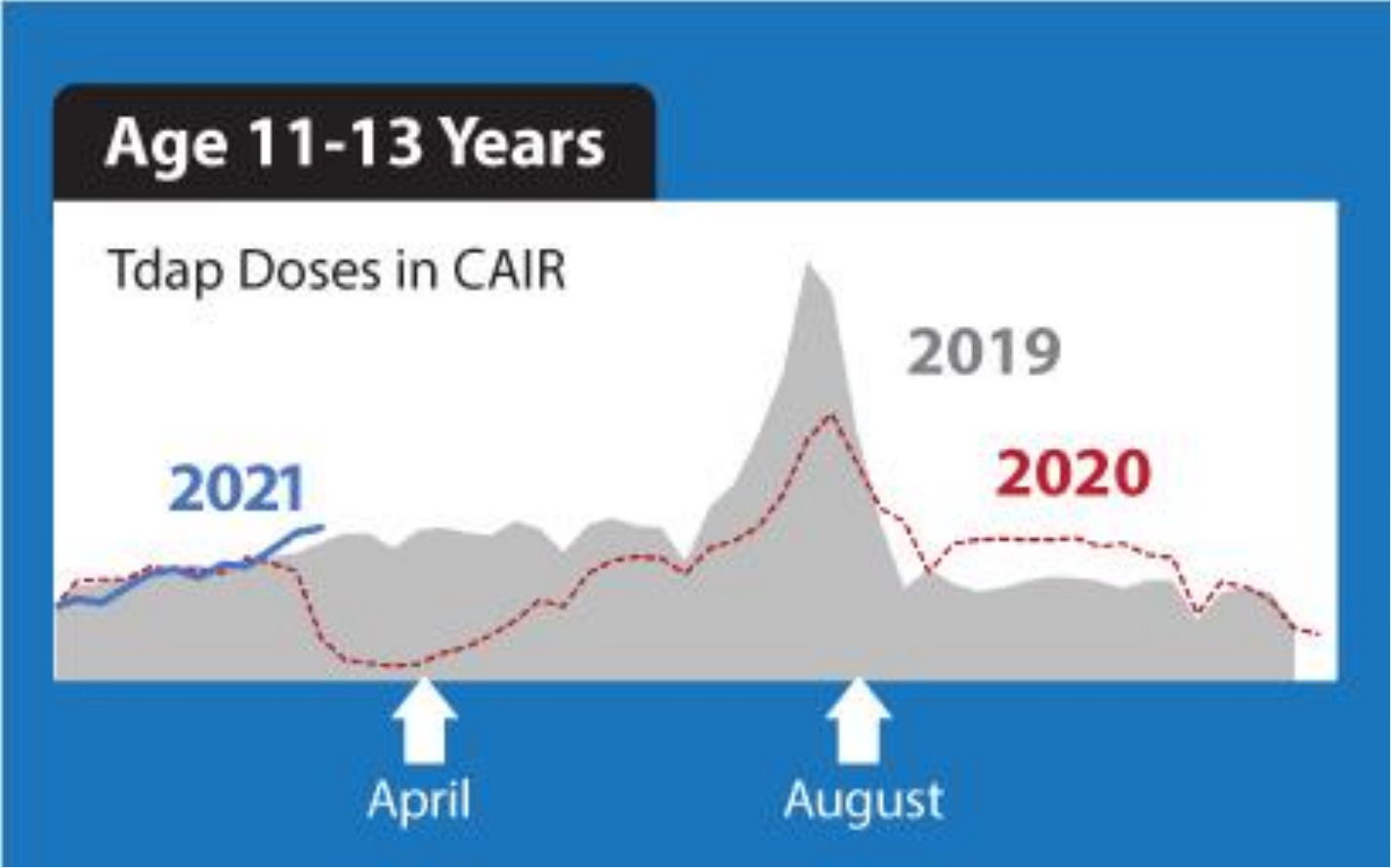


[Link here](#)



All Tdap Doses for Children Ages 11-13 years Submitted to CAIR2 By Week, from 2019-present

2020 vs 2019:
Tdap ↓21%
Age 11-13 years



[Link here](#)

Growing Concern of Potential Outbreaks

- **AAP:** “Concern exists that delays in vaccinations may result in secondary outbreaks with vaccine-preventable illnesses.”
- **CDC:** “With stay-at-home and shelter-in-place orders limiting movement outside the home, declines in outpatient pediatric visits have resulted in fewer vaccine doses being administered, leaving children at-risk for vaccine-preventable diseases, including measles and whooping cough.”
- **CDC:** “CDC’s public sector vaccine ordering data show a 14% drop in 2020-2021 compared to 2019, and measles vaccine is down by more than 20%. Kids need to get caught up now so that they are protected as they go back to in-person learning.”



Unprecedented Times

- We understand that priorities are different in every practice.
- #VaccinesAreEssential: Immunizations continue to be essential services.

Thank you for all the hard work you are doing and the care you are giving the patients who rely on you!

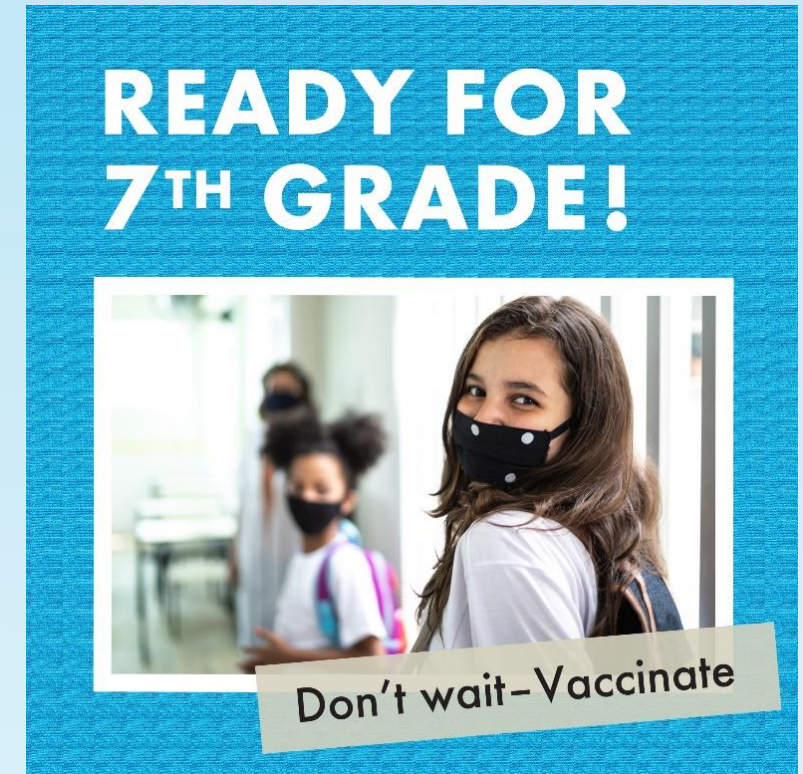


Closing the Gap



What Will It Take to Close the Gap?

- Current pace of catch-up immunization is too slow
- We need to get children caught up **now** for safe in-person learning



[Link here](#)



Barriers to Immunization Catch-up

- Immunization practice not optimal at baseline
- Telemedicine—challenging to integrate and obtain reimbursement for immunization visits
- Initial public health guidance recommended deferring preventive care
- ↓ Access to care
 - ✓ Job & insurance loss
 - ✓ Transportation challenges
 - ✓ Childcare challenges
 - ✓ Clinic closures/ reduction in hours and services
- Fear of coming in for care
- Remote schooling



Strategies to Close the Gap

- Partner with health plans and local health departments
- Identify gaps using:
 - ✓ Electronic health records (EHRs): prompts, gap analysis
 - ✓ Local immunization registry
 - ✓ CDC's "Catch-up" Immunization Schedule
- Outreach to parents
 - Implement reminder/recall (from CAIR and EHRs)
- Make modifications to workflow
 - Add appointment slots for immunization catch-up





Vaccinate with **Confidence**

A National Strategy to Reinforce Confidence in COVID-19 vaccines

Build Trust

Objective: Share clear, complete, and accurate messages about COVID-19 vaccines and take visible actions to build trust in the vaccine, the vaccinator, and the system in coordination with federal, state, and local agencies and partners.

Empower Healthcare Personnel

Objective: Promote confidence among healthcare personnel in their decision to get vaccinated and to recommend vaccination to their patients.

Engage Communities & Individuals

Objective: Engage communities in a sustainable, equitable, and inclusive way—using two-way communication to listen, build trust, and increase collaboration.



[Link here](#)

Vaccine Confidence: Definition

The trust that patients, parents, or providers have in:

- recommended vaccines;
- providers who administer vaccines; and
- processes and policies that lead to vaccine development, licensure, manufacturing, and recommendations for use.



[Link here](#)



Build Trust

- Share clear, complete, and accurate messages
- Take visible actions to build trust in the vaccine, the vaccinator, and the system
- Coordinate with federal, state, and local partners
- Communicate transparently about the process
- Provide regular updates on [benefits](#), [safety](#), [side effects](#) and [effectiveness](#); clearly communicate what is not known.
- Proactively address and mitigate the spread and harm of misinformation

[Link here](#)



Empower Healthcare Personnel

- Promote confidence among healthcare personnel in their decision to get vaccinated and to recommend vaccination to their patients
- Ensure healthcare systems and medical practices are equipped to [create a culture that builds confidence](#)
- Strengthen the capacity of healthcare professionals to have empathetic [vaccine conversations](#),
 - ✓ address myths and [common questions](#),
 - ✓ provide [tailored vaccine information](#) to patients,
 - ✓ use motivational interviewing techniques when needed.



[Link here](#)

[Link here](#)



Empower Healthcare Personnel

- Educate your staff on vaccines
- Have in office meetings to review 'Best Practices' in:
 - ✓ Vaccine storage and handling
 - ✓ Vaccine administration
- Take advantage of CDC and CDPH webinars and other resources on vaccines:
 - ✓ [Talking with your patients and parents about vaccines](#)



A screenshot of the EZIZ website. The header includes the EZIZ logo and the tagline "A one-stop shop for immunization training and resources." Below the header is a navigation menu with links for Home, Vaccine Programs, Vaccine Management, Storage Units, Temperature Monitoring, EZIZ Training, and Job Aids & Resources. The main content area is titled "EZIZ Training" and contains a note: "Note: EZIZ training has not been updated for COVID-19 vaccine. Refer to the California COVID-19 Vaccination Program for training and resources." Below this note are sections for "VFC Program" and "Storage and Handling". The "VFC Program" section includes "VFC Program Requirements (32 min.)" and "Vaccine Management Plan (10 min.)". The "Storage and Handling" section includes "Storing Vaccines (25 min.)". A right-hand sidebar titled "Resources" lists links for "For Trainers" (EZIZ Promo Flyer, EZIZ Quick-start Cards, CAIR Tools for Trainers) and "For Provider Offices" (EZIZ Training now required for Annual VFC Recertification, Vaccine Administration Materials, Storage and Handling Materials, VFC Forms, Flu and Disease Prevention, Handouts For Staff and Patients, CAIR Training, Training by Other Organizations).



Engage Communities and Individuals

- Engage communities in a sustainable, equitable, and inclusive way—using two-way communication to listen, build trust, and increase collaboration.

"...I MADE SURE MY WIFE GOT VACCINATED AND OUR KIDS TOO."

#justB

ShotByShot.org
stories of vaccine preventable disease

HEPATITIS B FOUNDATION

National Hepatitis B Foundation
CA Immunization Coalition



CDPH Immunization Branch Activities

- Frequent tracking of CAIR2 data
- Communications to medical providers and other stakeholders
 - ✓ [VFC providers](#)
 - ✓ “Call to action” regarding gaps
 - ✓ Sharing CDC’s pandemic immunization guidance
 - ✓ Sharing best practices (interviews)
- [#DontWaitVaccinate](#) campaign
- [CAIR2 reminder/recall feature](#)



[Link here](#)

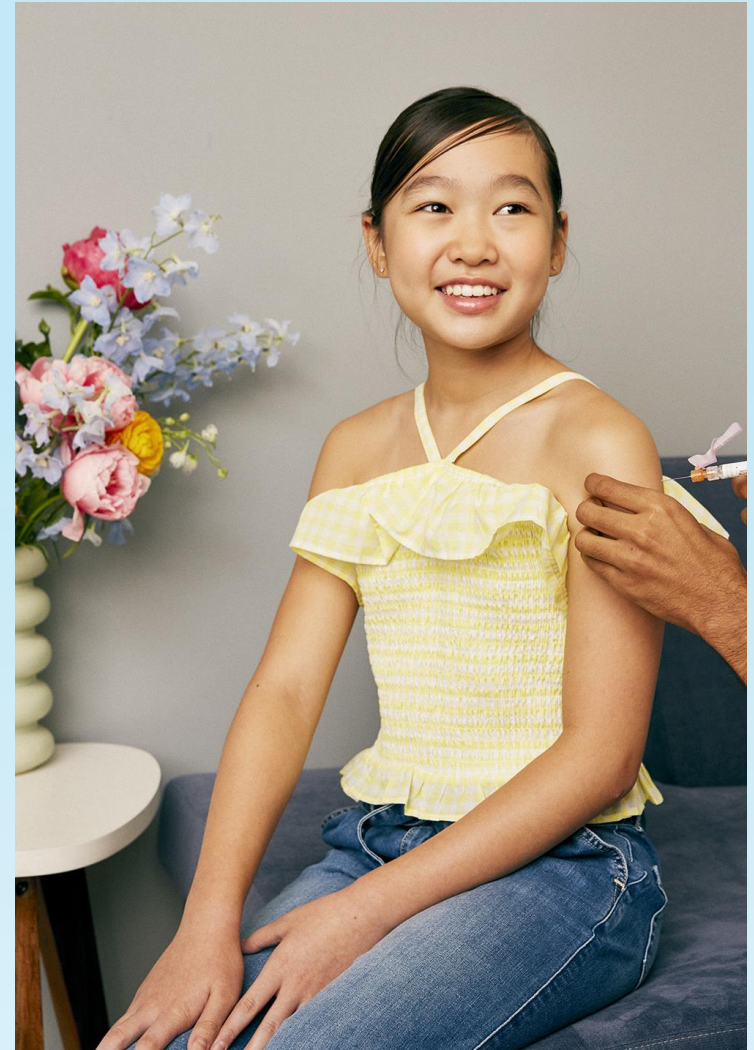


Latest Guidance



Latest AAP guidance:

- All well-child visits should occur in person whenever possible.
- Tele-health visits should continue to be supported, followed by timely in-person visit.
- Pediatricians should **identify children who missed well-child visits and recommended vaccinations** and contact them to schedule in-person appts. (includes **infants, newborns, children & adolescents**).



Credit: Heather Hazzan, SELF Magazine



<https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/guidance-on-providing-pediatric-well-care-during-covid-19/>

Back-to-School Immunizations Needed!

- At this moment, immunization requirements for school and childcare entry have **NOT** changed for the 2021-22 school year.
- Please recall patients due for immunizations. Immunizations are required for [childcare/pre-K](#), at [kindergarten](#) entry and advancement to [7th grade](#). Schools also check records of all transfer/new students at any grade.
- Please check shotsforschool.org for any updates.



News

COVID-19 Update:

Even with current school closures, immunization requirements for admission to school or child care in California for the 2019-2020 and 2020-2021 school year remain in place. Any updates will be posted here. (4/14/20)



Back-to-School Immunizations Needed!

En Español | Search



Child Care

K-12

7TH Grade

College

Laws

Featured Resources

- Guide to Immunization Requirements for School Entry | Spanish
- Parents' Guide | Spanish
- Vaccine Catch-up for Age 7+ Years
- Letter to Parents: Immunizations Needed | Spanish
- No Shots? No Records? No School. Poster | Spanish

How many students
in your school have

News

California Immunization Registry – Medical Exemption (CAIR-ME)

School and child care staff **may request access** to CAIR-ME after they receive a new medical exemption issued using CAIR-ME from an incoming enrollee. (1/4/21)

COVID-19 Update:

Please continue to encourage parents to bring their children in to the doctor's office to receive **shots they may have missed** during the pandemic. (1/7/21)



Children 12+ are Eligible for COVID-19 Vaccines

- As of 5/12/21, Pfizer authorized and recommended for ages 12-15
 - ✓ Only current option for ages 12-17
- Pediatric COVID-19 vaccine clinical trials in progress for
 - ✓ Other vaccines (Janssen, Moderna)
 - ✓ Ages 6 months - 11 years



[COVID-19 Vaccine Clinical Considerations](#)



Pfizer COVID-19 Vaccine in Adolescents

- 100% vaccine efficacy against symptomatic, laboratory-confirmed COVID-19 in 12-15-year-olds
- No serious adverse events associated with vaccination

https://www.cdc.gov/coronavirus/2019-ncov/downloads/vaccines/toolkits/COVID-19-Vaccine-for-Preteens_Teens-508.pdf



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COVID-19 Vaccine for Preteens and Teens

CDC recommends vaccination for everyone 12 years and older to help protect against COVID-19.

Why does my child need a COVID-19 vaccine?

COVID-19 vaccines help protect kids from getting COVID-19. Getting a COVID-19 vaccine will also help keep them from getting seriously ill even if they do get COVID-19.

When should my child be vaccinated?

All kids who are 12 years and older should get a COVID-19 vaccine. If your preteen or teen hasn't gotten their vaccine yet, talk to their doctor about getting it as soon as possible.

Are COVID-19 vaccines safe for my child?

Yes, COVID-19 vaccination provides safe and effective protection against the virus that causes COVID-19. The COVID-19 vaccines have been used under the most intensive safety monitoring in U.S. history.

The Pfizer-BioNTech COVID-19 Vaccine is now available for everyone ages 12 and older. In the clinical trial for children ages 12 through 15, the Pfizer-BioNTech vaccine was 100% effective at preventing COVID-19 with symptoms. In addition, children's immune systems responded to the vaccine in a way similar to those of older teens and young adults. No safety concerns were identified in the clinical trial.

All authorized and recommended COVID-19 vaccines:

- are safe,
- are effective
- help protect from severe illness

Before, during and after your child's vaccination

- Your child will need 2 shots given 3 weeks (21 days) apart to get the most protection.
- Tell the doctor or nurse about any allergies your child may have.
- Comfort your child during the appointment.
- To prevent fainting and injuries related to fainting, your child should be seated or lying down during vaccination and for 15 minutes after the vaccine is given.
- After your child's COVID-19 vaccination, you will be asked to stay for 15 minutes so your child can be observed in case they have a severe allergic reaction and need immediate treatment.

CS22388-0 | 05/12/21

www.cdc.gov/coronavirus/vaccines

Co-administration of COVID-19 Vaccines with Other Vaccines

- COVID-19 vaccines and other vaccines may be administered without regard to timing per [CDC guidance](#)
- Includes simultaneous administration of COVID-19 vaccines on the same day, or administration within 14 days
- If multiple vaccines are administered at a single visit, administer each injection in a different injection site
 - Spaced on same limb or on different limbs
- [CDC Best Practices](#) resource for multiple injections



CDC's Vaccination Catch-up Schedule



CDC's Immunization Catch-up Schedule

- Important tool, especially for kids who have missed doses
- [Have a copy](#) readily available or [download the CDC app](#)
- You can refer to this schedule to determine minimum intervals between recommended doses



Credit: Heather Hazzan, SELF Magazine



How to read the Catch-up Immunization Schedule

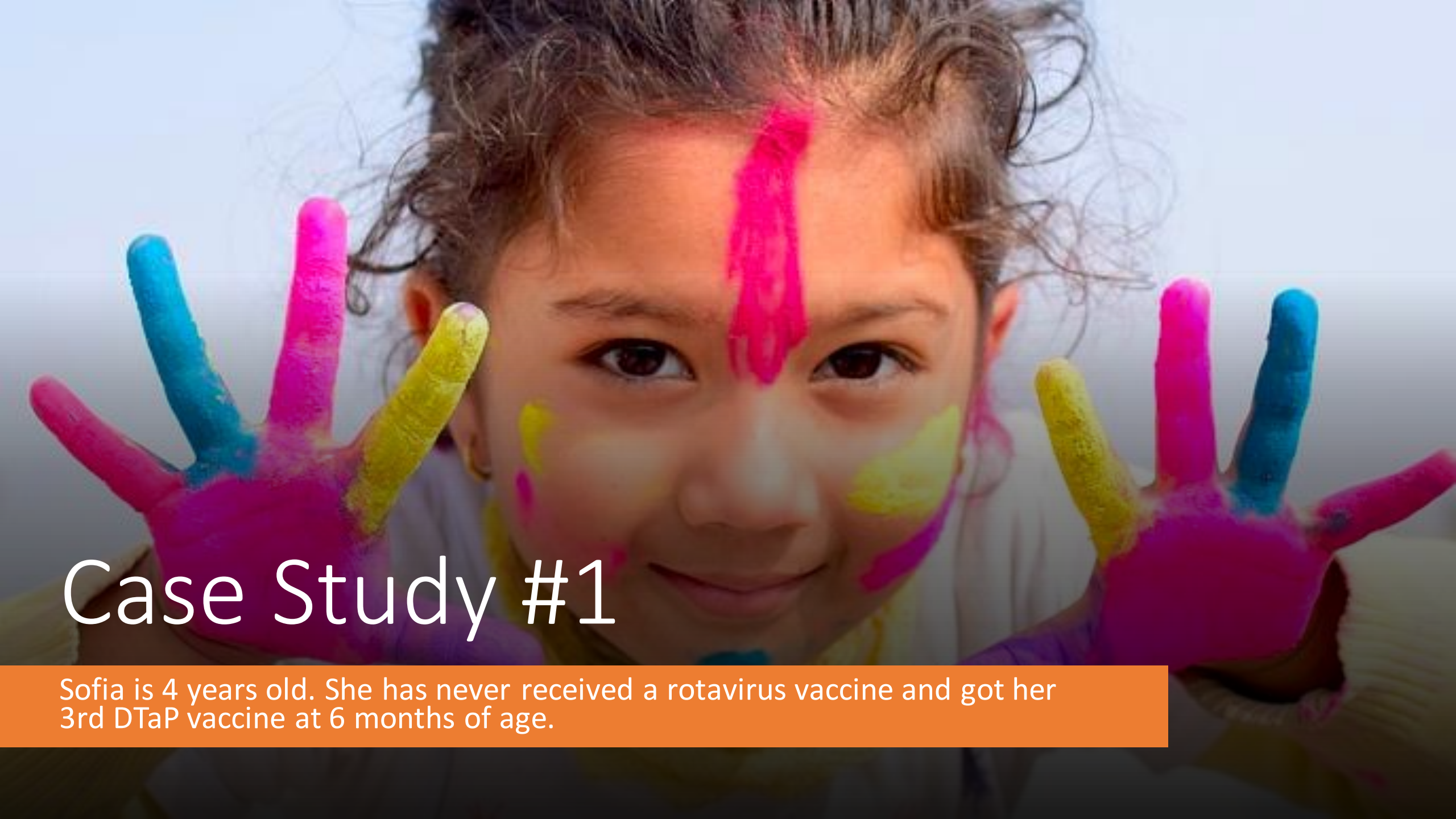
Table 2 Recommended Catch-up Immunization Schedule for Children and Adolescents Who Start Late or Who Are More than 1 month Behind, United States, 2021

The table below provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age. **Always use this table in conjunction with Table 1 and the notes that follow.**

Children age 4 months through 6 years

Vaccine	Minimum Age for Dose 1	Minimum Interval Between Doses			
		Dose 1 to Dose 2	Dose 2 to Dose 3	Dose 3 to Dose 4	Dose 4 to Dose 5
Hepatitis B	Birth	4 weeks	8 weeks and at least 16 weeks after first dose. Minimum age for the final dose is 24 weeks.		
Rotavirus	6 weeks Maximum age for first dose is 14 weeks, 6 days.	4 weeks	4 weeks Maximum age for final dose is 8 months, 0 days.		
Diphtheria, tetanus, and acellular pertussis	6 weeks	4 weeks	4 weeks	6 months	6 months
<i>Haemophilus influenzae</i> type b	6 weeks	No further doses needed if first dose was administered at age 15 months or older. 4 weeks if first dose was administered before the 1 st birthday. 8 weeks (as final dose) if first dose was administered at age 12 through 14 months.	No further doses needed if previous dose was administered at age 15 months or older. 4 weeks if current age is younger than 12 months and first dose was administered at younger than age 7 months and at least 1 previous dose was PRP-T (ActHib, Pentacel, Hiberix) or unknown. 8 weeks and age 12 through 59 months (as final dose) if current age is younger than 12 months and first dose was administered at age 7 through 11 months; OR if current age is 12 through 59 months and first dose was administered before the 1 st birthday and second dose was administered at younger than 15 months; OR	8 weeks (as final dose) This dose only necessary for children age 12 through 59 months who received 3 doses before the 1 st birthday.	





Case Study #1

Sofia is 4 years old. She has never received a rotavirus vaccine and got her 3rd DTaP vaccine at 6 months of age.

What Shots Does Sofia Need Today?

Table 2 Recommended Catch-up Immunization Schedule for Children and Adolescents Who Start Late or Who Are More than 1 month Behind, United States, 2021

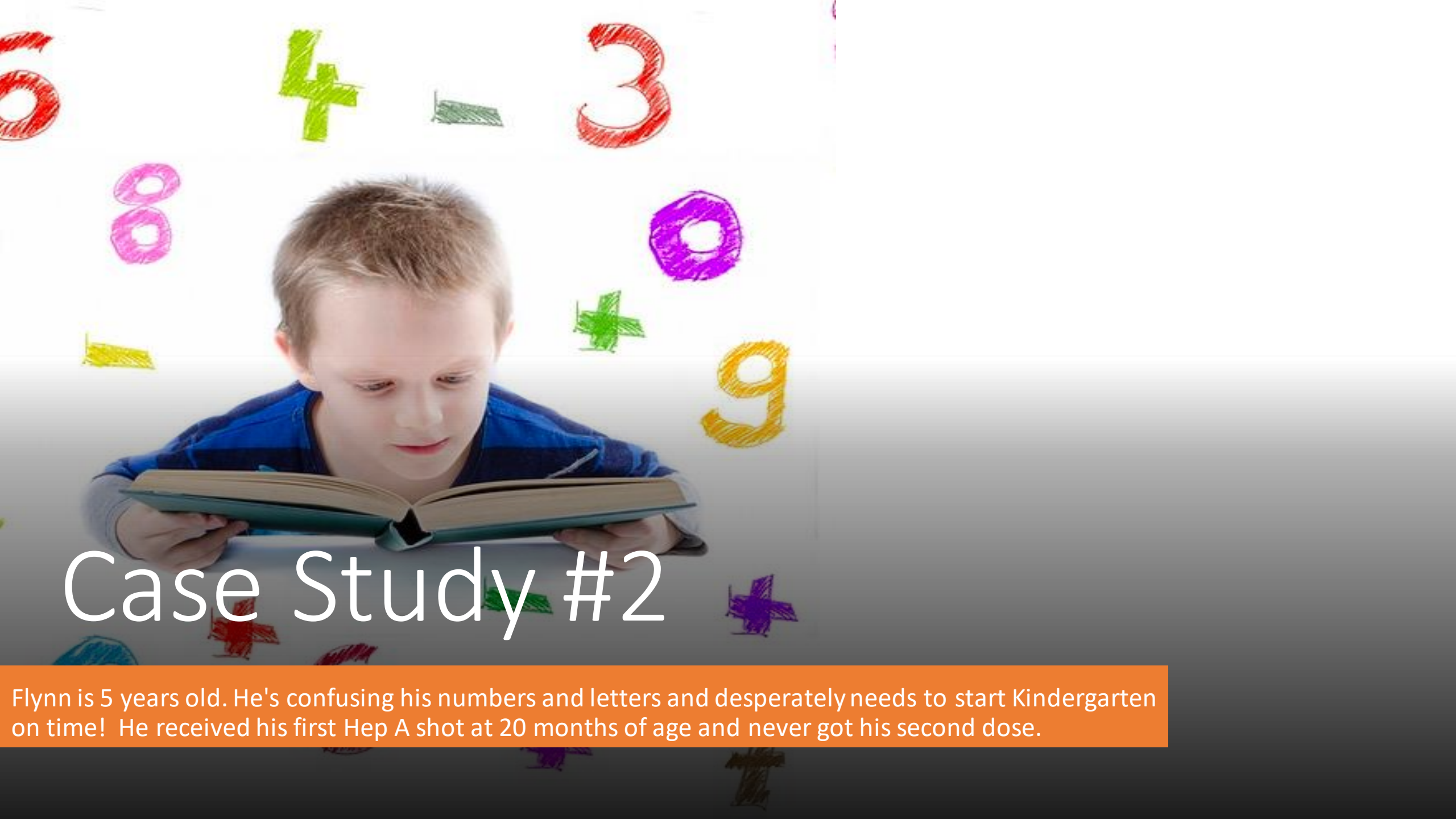
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Hepatitis B	Birth	4 weeks	8 weeks <i>and</i> at least 16 weeks after first dose. Minimum age for the final dose is 24 weeks.		
Rotavirus	6 weeks Maximum age for first dose is 14 weeks, 6 days.	4 weeks	4 weeks Maximum age for final dose is 8 months, 0 days.		
Diphtheria, tetanus, and acellular pertussis	6 weeks	4 weeks	4 weeks	6 months	6 months
<i>Haemophilus influenzae</i> type b	6 weeks	No further doses needed if first dose was administered at age 15 months or older. 4 weeks if first dose was administered before the 1 st birthday. 8 weeks (as final dose) if first dose was administered at age 12 through 14 months.	No further doses needed if previous dose was administered at age 15 months or older. 4 weeks if current age is younger than 12 months <i>and</i> first dose was administered at younger than age 7 months <i>and</i> at least 1 previous dose was PRP-T (ActHib, Pentacel). 8 weeks and age 12 through 59 months (as final dose) if current age is younger than 12 months <i>and</i> first dose was administered at younger than 15 months; OR if current age is 12 through 59 months <i>and</i> first dose was administered before the 1 st birthday <i>and</i> second dose was administered at younger than 15 months; OR	8 weeks (as final dose) This dose only necessary for children age 12 through 59 months.	

Sofia has surpassed the age to get Rotavirus vaccine

Sofia should get her 4th DTaP dose today and be scheduled to get her 5th DTaP dose in 6 months.





Case Study #2

Flynn is 5 years old. He's confusing his numbers and letters and desperately needs to start Kindergarten on time! He received his first Hep A shot at 20 months of age and never got his second dose.

What Shots Does Flynn Need Today?

Table 2 Recommended Catch-up Immunization Schedule for Children and Adolescents Who Start Late or Who Are More than 1 month Behind, United States, 2021

The table below provides catch-up schedules and minimum intervals between doses for children whose vaccinations have been delayed. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses. Use the section appropriate for the child's age. **Always use this table in conjunction with Table 1 and the notes that follow.**

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Pneumococcal conjugate	6 weeks	No further doses needed for healthy children if first dose was administered at age 24 months or older. 4 weeks if first dose was administered before the 1 st birthday. 8 weeks (as final dose for healthy children) if first dose was administered at the 1 st birthday or after.	No further doses needed for healthy children if previous dose was administered at age 24 months or older. 4 weeks if current age is younger than 12 months and previous dose was administered at <7 months old. 8 weeks (as final dose for healthy children) if previous dose was administered between 7–11 months (wait until at least 12 months old); OR if current age is 12 months or older and at least 1 dose was administered before age 12 months.	8 weeks (as final dose) This dose only necessary for children age 12 through 59 months who received 3 doses before age 12 months or for children at high risk who received 3 doses at any age.	
Inactivated poliovirus	6 weeks	4 weeks	4 weeks if current age is <4 years	6 months (minimum age 4 years)	
Measles, mumps, rubella	12 months	4 weeks			
Varicella	12 months	2 months			
Hepatitis A	12 months	6 months			

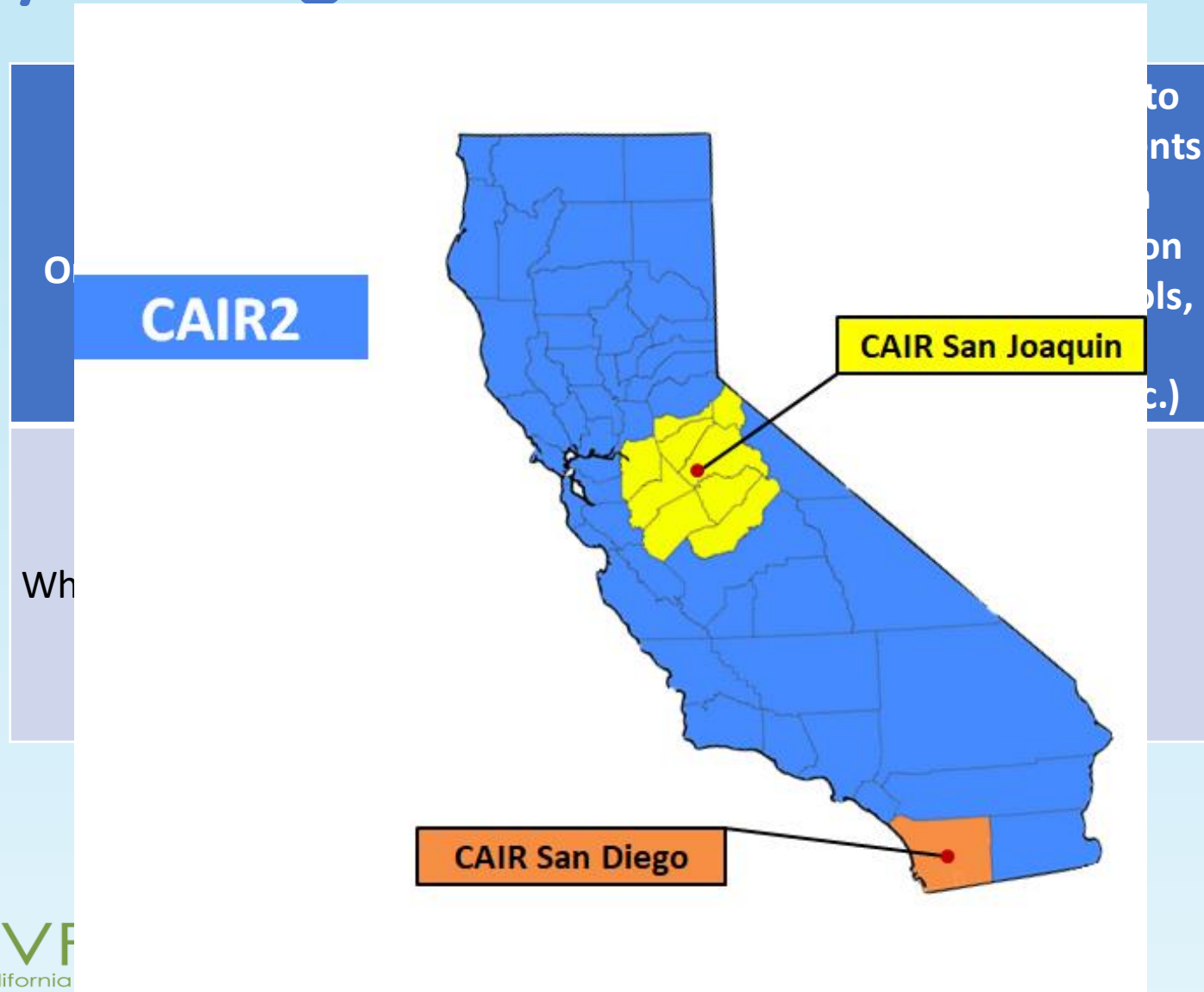
It's been more than 6 months since Flynn received his first Hep A shot. He can get his 2nd Hep A dose today and start Kindergarten on time!

Using CAIR2 to Obtain Patient Up-to-Date Rates



Enroll in your region's Immunization Registry

CAIR2:



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California
for Adults

for Children

Branch

Healthy Futures/RIDE and SDIR

<p>CAIR – San Joaquin Region (Healthy Futures)</p>	<p><i>San Joaquin County Public Health Services</i> 1601 East Hazelton Ave Stockton, CA 95205 Contact: HF Help Desk Phone: 209-468-2292 Fax: 209-468-8361 Email: support@myhealthyfutures.org</p>	<p>Alpine Amador Calaveras Mariposa Merced San Joaquin Stanislaus Tuolumne</p>
<p>CAIR – San Diego Region (SDIR)</p>	<p><i>County Of San Diego Health and Human Services Agency, Immunization Program - SDIR</i> P.O. Box 85222, MS P-573 San Diego, CA 92186-5222 SDIR Help Desk: 619-692-5656 SDIR Help Desk Fax: 619-692-6619 Email: sdir.hhsa@sdcounty.ca.gov</p>	<p>San Diego</p>



Resources for CAIR2 Providers

Request individual CAIR2 user accounts for staff to:

- view and print patient immunization history
- Generate reports that show what's due today for your patient
- Run clinic reports and manage your clinic's patient list
- Use the Reminder/Recall feature to print reminder/recall notices



The California Immunization Registry (CAIR2) is a secure, confidential, statewide computerized immunization information system for California residents.

CAIR2 Is A Winner!! – Best Application Serving the Public



CAIR2 Trainings



CAIR2 Help Desk

Need CAIR Help Desk?

CAIRHelpDesk@cdph.ca.gov
or call 800-578-7889

Hours:
9am-4pm Monday to Thursday
10am-4pm Friday

CAIRHelpdesk@cdph.ca.gov

Phone: 800-578-7889
Fax: 888-436-8320

▶ **Need A Unique IIS ID (= CAIR2 Org Code) To Participate in the COVID-19 TPA Program?** [Enroll in CAIR2 Now](#)

▶ **COVID-19 Vaccination Resources**
[Learn More](#) [Snowflake \(for counties/hlth plans\)](#) [Patient Status \(for providers\)](#)

▶ **To access the California Immunization Registry Medical Exemptions (CAIR-ME) web site, click [here](#)**

▶ **Reminder/Recall Upgrade – Contact Email Addresses and Phone Numbers Are Now Included!**
[Learn More](#)

▶ **Manage Patient Status – Remove 'Inactive' Patients From Your CAIR2 Reports!**
[Learn More](#)

▶ **Enroll Your Organization in CAIR2!**
[Enroll to submit information electronically from your EHR](#)
[Enroll to enter information manually into CAIR2](#)

▶ **CAIR2 Account Update (Supervisors Only)**
[Manage your existing CAIR2 Organization Account](#)

▶ **Data Exchange Submitters**
[How to Maintain High Data Quality](#)
[View CAIR2 Patient Data In Your EHR – Sign Up Now for BiDX](#)
[Data Exchange \(DX\) FAQs](#)

▶ **Pharmacies**
[Learn How to Report Immunizations to CAIR2](#)



Find CAIR2 resources at <https://cairweb.org/>

Resources for CAIR2 Data Exchange Providers

CAIR2 Bi-Directional Exchange

- Can see patient's recommendations from CAIR in your EMR
- Can upload shot records from CAIR into your EMR
- For more info, go to <https://cairweb.org/bidx/>



BI-DIRECTIONAL EXCHANGE

Benefits:

Your Electronic Health Record system (EHR) will be able to access statewide immunization records in CAIR2 and help you:

- Save time from tracking down patients' records
- Improve patient care with more complete immunization histories and forecasting.

How to Sign Up:

1. Review the *CAIR2 Bi-directional Data Exchange Checklist*.
2. Consult with vendor on EHR readiness. They should review the *CAIR2 Bi-directional (QBP/RSP) Data Exchange Implementation Guide*.
3. Complete *CAIR2 BIDX Interest/Readiness* survey.
4. When invited, complete BIDX Test Plan.
5. Begin sending/receiving BIDX messages.

Resources available at cairweb.org/bidx

For more information email CAIRDataExchange@cdph.ca.gov.

Example of How it Works:

- 1 Open patient record in EHR. Click to access records in CAIR2.



Steps and functionality will vary depending on your EHR.

- 2 Find matching patient and missing doses in pop-ups from CAIR2.

Verify patient match.

CAIR2 Records	
Patient Match	
Name	Date of Birth
<input checked="" type="checkbox"/> Garcia, Sophia	04/10/2016

Your EHR may be set up to allow you to select doses or import automatically.

Select doses and import into your EHR.

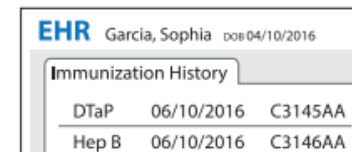
CAIR2 Records		
Garcia, Sophia DOB 04/10/2016		
Vaccine Name	Date Given	Lot Number
<input checked="" type="checkbox"/> DTaP	06/10/2016	C3145AA
<input checked="" type="checkbox"/> Hep B	06/10/2016	C3146AA

Import into EHR

View forecast.

CAIR2 Records	
Garcia, Sophia DOB 04/10/2016	
Immunization Forecast	
	Recommended
Hep A	04/10/2018
Influenza	09/01/2018
MMR	04/10/2018

- 3 Imported doses are now part of patient's record in your EHR.



CAIR2 Quality Assurance User Role

- Look-up patient records and print patient reports
- Run clinic reports
 - Ex. Doses Administered Report, Reminder/Recall Report. etc.
- Monitor Data Exchange activity, see the status of records sent to CAIR from your EHR
- Quality Assurance Role is available for **ALL** Provider Organization Types – including Read Only
- Training is **NOT** required for this role



How to Read the CAIR2 Immunization Record

- Shows Vaccine Group for each shot received
- Date Admin column tells you when the shot was given
- Series column shows you which dose in the series that shot counted for
- Vaccine groups for combination shots are listed separately
- Click on the Date Admin link to see why a shot was not counted in series

Current Age: 4 years, 11 months, 4 days
 Patient Notes (0) [view or update notes](#)

[Immunization History](#) [TB Test History](#)

Add New Imms Add Historical Imms Edit Patient Reports Print Record Print Confidential Record

Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
DTP/aP	08/03/2016	1 of 4	DTaP-HepB-IPV [Pediarix ©]	Full	No			
	10/12/2016	2 of 4	DTaP-HepB-IPV [Pediarix ©]	Full	No			
	09/03/2017	3 of 4	DTaP,5 pertussis antigens [DAPTACEL ©]	Full	No			
HepA	06/04/2017	1 of 2	HepA-Ped 2 Dose [Havrix-Peds 2 Dose ©]	Full	No			
	12/04/2017	2 of 2	HepA-Ped 2 Dose [Havrix-Peds 2 Dose ©]	Full	No			
HepB	06/01/2016	1 of 4	HepB-Peds [Engerix-B Peds ©]	Full	No			
	08/03/2016	2 of 4	DTaP-HepB-IPV [Pediarix ©]	Full	No			
	10/12/2016	3 of 4	DTaP-HepB-IPV [Pediarix ©]	Full	No			
Hib	08/03/2016	1 of 3	Hib-OMP [PedvaxHIB ©]	Full	No			
	10/12/2016	2 of 3	Hib-OMP [PedvaxHIB ©]	Full	No			
	06/04/2017	3 of 3	Hib-OMP [PedvaxHIB ©]	Full	No			
MMR	09/01/2016	NOT VALID	MMR [MMR II ©]	Full	No			
PneumoConjugate	08/03/2016	1 of 3	PCV13 [Prevnar13 ©]	Full	No			
	10/12/2016	2 of 3	PCV13 [Prevnar13 ©]	Full	No			
Polio	08/03/2016	1 of 3	DTaP-HepB-IPV [Pediarix ©]	Full	No			
	10/12/2016	2 of 3	DTaP-HepB-IPV [Pediarix ©]	Full	No			
	12/15/2016	3 of 3	Rotavirus, Pent [RotaTeq ©]	Full	No			
Rotavirus	08/03/2016	1 of 3	Rotavirus, Pent [RotaTeq ©]	Full	No			
	10/12/2016	2 of 3	Rotavirus, Pent [RotaTeq ©]	Full	No			
	12/15/2016	3 of 3	Rotavirus, Pent [RotaTeq ©]	Full	No			
Varicella	06/04/2017	1 of 2	Varicella [Varivax ©]	Full	No			



User guides: <https://cairweb.org/cair2-training-resources/>

Before Reviewing CAIR2 IZ Recommendations

- Compare the patient-provided Yellow Card or immunization document to what's in CAIR
- Verify that all doses received are listed in the patient's CAIR record
- If doses listed on IZ document are missing in CAIR, transcribe as Historical so that you're viewing the patient's full IZ history in CAIR



Viewing Vaccine Recommendations in CAIR2

- Ordered by Vaccine Group in alphabetical order
- Green highlighting shows you which shots can be given today
- Will show if schedule is completed, if patient has aged out of the schedule, or if the shot is contraindicated

Current Age: 11 years, 10 months, 4 days
 Patient Notes (0) [view or update notes](#)

[Immunization History](#) [TB Test History](#)

Add New Imms Add Historical Imms Edit Patient Reports Print Record Print Confidential Record

Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
HPV	03/15/2021	1 of 2	HPV, NOS				Yes	
Polio	08/15/2012	1 of 4	Polio, NOS				Yes	
Td/Tdap	03/15/2021	1 of 3	Td (adult), NOS				Yes	

Vaccines Recommended by Selected Tracking Schedule

Select	Vaccine Group	Vaccine	Earliest Date	Recommended Date	Past Due Date
<input type="checkbox"/>	DTP/aP	DTaP, NOS		Maximum Age Exceeded	
<input type="checkbox"/>	HepA	HepA, NOS	07/01/2010	07/01/2010	02/01/2011
<input type="checkbox"/>	HepB	HepB, NOS	07/01/2009	07/01/2009	10/01/2009
<input type="checkbox"/>	HPV	HPV, NOS	09/15/2021	09/15/2021	04/15/2022
<input type="checkbox"/>	Influenza-seasnI	Flu NOS	07/01/2021	08/01/2020	07/01/2021
<input type="checkbox"/>	Men ACWY	MCV4, NOS	07/01/2019	07/01/2020	07/01/2022
<input type="checkbox"/>	MMR	MMR	07/01/2010	07/01/2010	11/01/2010
<input type="checkbox"/>	Polio	Polio-Inject	09/12/2012	09/12/2012	11/15/2012
<input type="checkbox"/>	Td/Tdap	Tdap	04/12/2021	04/12/2021	05/15/2021
<input type="checkbox"/>	Varicella	Varicella	07/01/2010	07/01/2010	11/01/2010

Add Selected



Resources



[Link here](#)

CDC Immunization and Influenza resources

- [CDC Childhood Vaccination Toolkit](#)
- [CDC Vaccine Catch-Up Schedule](#)
- [CDC Vaccine Page for Families](#)
- [2021 Immunization Schedules](#) [CDC-Info On Demand](#)

CDPH Immunization resources

[Don't Wait—Vaccinate! Toolkit](#)

- [Immunizations During COVID-19](#)
- [CAIR2 Reminder/Recall](#)
- [COVID-19 Toolkit](#)
- [Shots For School](#)

American Academy of Pediatrics

- [#CallYourPediatrician](#)
- [AAP Vaccine Communication Aids](#)



COVID-19 Vaccine Materials for Parents

- CDC [COVID-19 Vaccines for Children and Teens](#)
- American Academy of Pediatrics:
 - ✓ [When can children get the COVID-19 vaccine?](#)
 - ✓ [The Science Behind the COVID-19 Vaccine: Parent FAQs](#)
- [v-safe](#): parents encouraged to register their children for post-vaccination symptom checks



Question

When can children get the COVID-19 vaccine?



James D. Campbell, MD, MS, FAAP

Answer

With vaccines now available to protect against COVID-19, we've made a big step toward ending the pandemic.

Three **vaccines** have received emergency use authorization for adults, and one can also be given to teens age 12 and older. Clinical trials are now underway in children as young as six months old.

Research shows the vaccines are remarkably effective and safe. The American Academy of Pediatrics (AAP) urges children and adults to get the COVID-19 vaccine as soon as it is available to them. This is especially important with a rise in cases caused by variant strains of the virus, which seem to be more contagious.



COVID-19 Vaccine Materials for Providers

- CDPH [Youth Vaccine Toolkit](#)
- CDC: [Pediatric Healthcare Professionals COVID-19 Vaccination Toolkit](#)
- CDC: [Engaging in Effective COVID-19 Vaccine Conversations](#)
- American Academy of Pediatrics: [COVID-19 Vaccine Implementation in Pediatric Practices](#)
- CDC: [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States](#)
- COVID-19 Program Enrollment: [COVID-19 Vaccine – California Vaccines for Children \(VFC\) \(eziz.org\)](#)



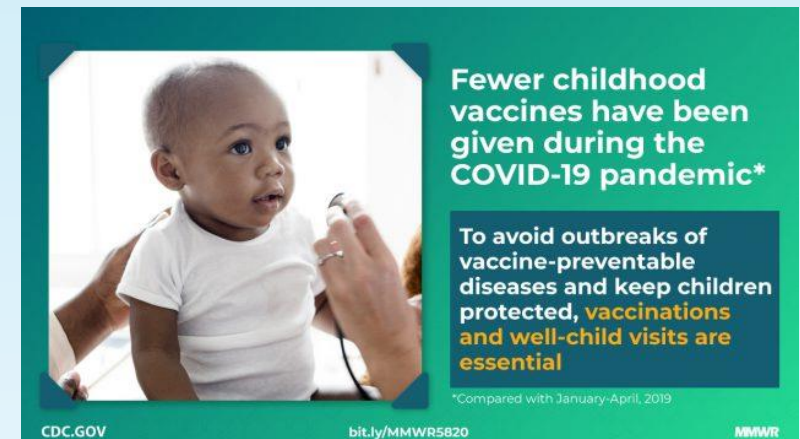
Summary

- Reviewed data analysis demonstrating major gaps in pediatric immunizations during the COVID-19 pandemic
- Discussed strategies, tools and various resources to increase immunization rates for your patients
- Reviewed ACIP recommendations for catch-up immunizations
- Discussed how to effectively utilize CAIR2 to identify children in need of vaccinations



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- Jasmine Droze, Cynthia Yen, Timothy Lo, and Mark Foster for data analysis
- Steve Nickell, Edgar Ednacot, Rob Schechter, Cora Hoover
- Teach Webinar Production Team: Claudia Aguiluz, Michele Barkus, Christina Sapad, Rebeca Boyte, Anya Gutman, Cecilia LaVu, Edgar Ednacot and Steve Vantine



A background image showing several hands raised in a gesture of participation or agreement. The hands are of various skin tones and are positioned in a way that suggests a group of people. The text "Now It's Time for Q & A" is overlaid on the image in a white, sans-serif font. A thin white horizontal line is positioned below the text.

Now It's Time for Q & A