February 13, 2015

TO: Vaccines for Children (VFC) Providers

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SUBJECT: 2015 Recommended Immunization Schedule for Persons 0 Through 18 Years and VFC Annual Mailing

BACKGROUND

Each year the VFC Program relays important information about approved pediatric and adolescent immunization schedules to enrolled providers. This communication highlights changes in the 2015 Recommended Immunization Schedule for Persons Aged 0 through 18 Years, includes important reminders about adolescent immunizations, and alerts practices to key VFC resources. We encourage providers to review these resources with all staff who order, manage, prepare, and administer vaccines. Also make sure to recycle older versions of updated materials.

In early spring, the VFC Program will mail a sample of the resources highlighted in this letter along with a new VFC Program binder. Use this binder to file important VFC Program related documentation and facilitate your practice’s organization.

NEW IMMUNIZATION SCHEDULES AND FOOTNOTES

The 2015 Recommended Immunization Schedule for Persons Aged 0 Through 18 Years has been approved by the Advisory Committee on Immunization Practices (ACIP), Centers for Disease Control and Prevention (CDC), American Academy of Pediatrics, American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists. A summary of the updates to the 2015 immunization schedule was published in the MMWR on February 6, 2015, and the figures, footnotes, and tables are posted on the CDC website. For each vaccine, the footnotes summarize the current recommendations for routine and catch-up immunizations and those for high-risk persons.

In keeping with your VFC provider agreement, providers should follow the recommended 2015 ACIP immunization schedule. We encourage providers to review the 2015 immunization schedule, complete footnotes, and catch-up schedule together with all staff, especially those who order and administer vaccines. We recommend that the 2015 schedules, including footnotes, be posted for reference in the office.
UPDATES TO THE 2015 SCHEDULE

Primarily, nonsubstantive changes were made to the 2015 Immunization Schedule. Information on DTaP, Tdap, pneumococcal vaccines, meningococcal conjugate vaccines, MMR, Hib, varicella, and influenza vaccines was clarified. Contraindications to LAIV were updated.

MMR Vaccine

The recommendation for MMR vaccine for infants 6-11 months of age prior to international travel was highlighted with a purple bar (denoting a recommendation for a high-risk population). These children should still receive two doses of MMR vaccine on or after their first birthday. In addition, children 12 months and older should receive 2 MMR vaccine doses prior to international travel (minimum interval between doses is 4 weeks).

Contraindications vs. Precautions to LAIV

A number of influenza vaccine recommendations were updated for the 2014-15 influenza season. Certain conditions previously considered contraindications to LAIV are now considered precautions; these include:

- Asthma in children ages 5 years of age and older, and
- Underlying medical conditions that might predispose persons to complications after wild-type influenza infection. These conditions may include chronic pulmonary, cardiovascular (except isolated hypertension), renal, hepatic, neurologic, hematologic, or metabolic disorders (including diabetes mellitus).

Remaining contraindications to LAIV include:

- Persons who have experienced severe allergic reactions to LAIV, any of its components, or to a previous dose of any other influenza vaccine
- Children 2 through 17 years receiving aspirin or aspirin-containing products
- Persons who are allergic to eggs
- Pregnant women
- Immunosuppressed persons
- Children 2 through 4 years of age with asthma or who had wheezing in the past 12 months; or
- Persons who have taken influenza antiviral medications in the previous 48 hours.

Reminder: ADOLESCENT IMMUNIZATIONS

HPV Vaccine

- **Routine HPV vaccination is recommended for all females and males**, at age 11-12 years. VFC vaccine may be used through the age of 18 years to catch-up both females and males to complete the full-3 dose series.
  - The HPV vaccine series is recommended for both preteen girls and boys.
  - HPV vaccine should be given along with Tdap and meningococcal conjugate vaccines at the preteen health visit. Do NOT defer until later in adolescence.
  - HPV vaccination is most effective if given PRIOR to onset of sexual activity. The fact that a child is not sexually active is NOT a reason to delay HPV vaccination.
Providers should utilize reminders and recall patients for their 2nd and 3rd doses to complete the HPV series by 13 years of age. The series may be started as early as age 9 years.

A summary of HPV vaccine recommendations was published in the MMWR in August 2014. Providers should read this document completely.

**Strong Clinician Recommendation for HPV Vaccination in Pre-teen Boys and Girls**

A strong recommendation from clinicians is the best predictor of vaccination. CDC recently summarized some key methods to help clinicians deliver a strong, concise, and clear HPV vaccine recommendation. These methods include:

- Recommend the HPV vaccine in the same way and during the same visit as the other adolescent vaccines. Some evidence suggests that the best recommendation for HPV vaccination includes all indicated adolescent vaccination.
- Use the “HPV is cancer prevention” message, because parents identify cancer prevention as important in their decision to vaccinate their children.
- Emphasize your personal belief in the importance of the HPV vaccine.
- Remind parents that the HPV vaccine is safe and effective. If parents have questions, address questions directly and confidently.

CDC has additional resources and tips for clinicians:

- Additional Medscape materials may be found at the CDC HPV portal for clinicians under the tab “Tools for Your Practice”: [http://www.cdc.gov/vaccines/YouAreTheKey](http://www.cdc.gov/vaccines/YouAreTheKey)

CDC and CDPH materials for patients:

- [Did you know HPV Causes --](http://www.cdc.gov/vaccines/who/teens/for-hcp-hpv-causes.pdf) A poster for your waiting rooms and exam rooms that can serve as a conversation starter about the HPV vaccine.
- [How Important is HPV Vaccine for Preteens and Teens?--](http://www.cdc.gov/vaccines/who/teens/for-hcp-hpv-importance.pdf) A flyer for parents of preteens on the dangers of HPV and the vaccine. After reading the flyer, nearly 80% of parents said they’d likely vaccinate their child in the next 12 months.

**Meningococcal Vaccine**

- [Routine MCV4 booster](http://www.cdc.gov/vaccines/who/teens/for-hcp-mcv4-booster.pdf) is recommended at age 16 years, in addition to the routine preteen 11-12 year old dose.
Tdap

- **Tdap** is required for all students prior to attending 7th grade.
- **REMINDER FOR PREGNANT ADOLESCENTS:** Tdap is recommended during EACH pregnancy, preferably during weeks 27 through 36 weeks’ gestation, regardless of time since previous Tdap vaccination. The goal of this recommendation is to decrease pertussis and its serious complications in young infants.

Catching Up on Other Immunizations

The preteen visit is a great time to catch-up on ALL previously recommended vaccine doses:

- A total of **two doses of varicella vaccine** are recommended for anyone who hasn’t had varicella disease. Many adolescents haven’t yet received their second dose.
- Given the recent measles outbreak, make sure all school-aged youth have **2 doses of the MMR vaccine**.
- The entire immunization record should be reviewed for any missing doses.

**REMINDERS AND ADDITIONAL RESOURCES**

**Reminder**

Federal law requires that healthcare providers (whether public or private) provide a Vaccine Information Statement (VIS) to a patient, parent or legal guardian **prior to** the administration of each vaccine dose. Additionally, providers are also required to record specific information on the patient’s permanent medical record, including:

- The VIS edition date found on the back, right-bottom corner.
- The date the VIS is provided (i.e., the date of the visit when the vaccine is administered).
- The office address and name and title of the person who administers the vaccine.
- The date the vaccine is administered.
- The vaccine manufacturer and lot number.

Please make sure to provide the most up-to-date VIS for each vaccine at every immunization visit, as federally required. The most current VIS may be downloaded at [www.eziz.org](http://www.eziz.org).

**Spring VFC Program Mailing**

In early spring, the VFC Program will mail a sample of the resources highlighted in this letter. In addition, the California VFC Program will mail a new VFC Program binder in which to file important information, such as Vaccine Management Plans, certificates, and other VFC-related documents. Use of the VFC Program binder will facilitate your practice’s organization.

**2015 VFC Program Temperature Logs**

In January, the VFC Program introduced new refrigerator and freezer temperature logs, in Fahrenheit and Celsius. The new logs are designed to ensure accurate temperature recordings and more detailed documentation of actions taken when out-of-range temperatures are discovered. Begin using the new temperature logs immediately, if you have not done so. For your convenience, the VFC Program is providing the logs as tear-off pads intended to last 12 months. Each pad also has a job aid describing **how to record temperatures** and an **action guide** detailing the steps to take if temperatures are out of range. Providers with multiple refrigerators and freezers may request additional temperature log pads from their local health department. Single-month temperature logs and action guides are available for download from EZIZ.org.
Vaccine Administration Resources

Providers should ensure that all staff who administer vaccines have completed the EZIZ training modules on preparing vaccines and Administering vaccines. Although these modules are not required, they are a critical part of comprehensive staff development and competency assessment for your practice.

Vaccine Receiving Log and Checklist

One of the most efficient ways to manage inventory is to inspect each shipment as soon as it arrives. VFC providers must report any discrepancy or issue with shipped vaccines immediately upon shipment receipt. Use the Vaccine Receiving Log and Checklist (IMM-1112) with every vaccine delivery to ensure it contains the correct vaccine, the correct number of doses, and that it was shipped at the correct temperature. Document discrepancies on the checklist and submit to the VFC Program.

Vaccine Fact Sheets

Download and review Vaccine Fact Sheets, one-page reference sheets for staff who prepare and administer immunizations. Each Fact Sheet provides information about routine schedules, minimum intervals, approved for use age ranges, administration routes, billing codes, storage, and more.

QUESTIONS?

If you have any questions, please call your VFC Field Representative or the VFC Program at 877-243-8832 (877-2GET-VFC) or visit www.EZIZ.org.

Resources included in this mailing:

- 2015 Recommended Immunization Schedule for Persons Aged 0 Through 18 Years (IMM-662)
- Immunization Timing 2015 (IMM-395)
- Refrigerator Temperature Log pad (IMM-1125)
- Freezer Temperature Log pad (IMM-1126)
- VFC Vaccine Receiving Log and Checklist (IMM-1112)
- Fact Sheet: Tdap (IMM-1076)
- Fact Sheet: HPV (IMM-1060)
- Fact Sheet: MCV4 (IMM-1064)
- Fact Sheet: Varicella (IMM-1078)
- Vaccines For Your Preteen (IMM-1154)