

Vaccine Ordering: Let's Review

It's been one year since we transitioned to direct distribution of vaccines by McKesson Specialty. Generally speaking we feel the change has been positive! Most notably...wasn't it nice to not have to drive to your local District Office to pick up vaccine this past winter? On the down side...even a full year later we're still making calls to most offices to clarify vaccine ordering, so let's review.

We hear sometimes that we don't allow you to order enough vaccine. That is never our intent. Our intent is to supply you with right amount of vaccine for an 8 week inventory for your practice. When you place an order every 4 weeks, a cushion of 4 weeks is built in to account for unanticipated fluctuations in vaccine use, as well as delivery time from McKesson which can vary from 1- 3 weeks, but is typically 2 weeks. If you wait to place your order in 6 weeks you've cut that cushion in half and may run out of vaccine if use is high, delivery is slow, or both. With the exception of very low use practices, mark your calendar, order every 4 weeks.

You're calculating future vaccine need based on the past month's use. However, we understand seasonal variation and allow you to order for instance, more Tdap in the spring knowing school physicals will take place over the summer, and less Pneumovax in the spring knowing more is typically administered in the winter. Please adjust your order to anticipate seasonal increases and decreases. Also, make use of a cover memo to tell us of unusual occurrences that affect your order. For instance, if 2 of 4 providers were on vacation the prior month your vaccine use will be atypically low. Don't calculate your future need based on those low numbers. Anticipate your true need and briefly tell us why you made adjustments in a cover memo. If the math is confusing to calculate your order, call us! We're happy to walk you through it.

Vermont Immunization Coverage Rates Are Decreasing

In the last Vaccinate Vermont we shared with you the National Immunization Survey rates for Vermont and the unfortunate trend that these rates are continuing to decline. By 24months of age only 59% of Vermont children are fully immunized with 4 Dtap, 3 polio, 2 MMR, 3 hepatitis b, 3 Hib, and 1 varicella as compared to 2006 when 71% met the same criteria. So, what can be done to get these numbers up? Unfortunately, there is not a simple answer to the problem.

One barrier to increasing immunization rates is families who miss their appointments. Unsurprisingly, nationally those families who no show or change their appointments are much more likely to have under immunized children. Practices realize this and we realize this. There are many reasons why a family might miss an appointment such as limited transportation, lack of money, and busy schedules. There are also many resources that can help families with these issues, such as Medicaid transportation, Dr. Dynasaur and reminder recall notices. Yet, still families miss appointments. One way to be certain that missed appointments do not result in under immunized children is to use every opportunity to immunize a child. If one child in a household is coming in for an appointment, check to see if a sibling is behind in immunizations. If a child is being seen for a mild illness, check their immunization record. Are they missing anything? Every visit can be an opportunity to get a child caught up on their immunizations.

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View **Vaccinate Vermont** at: <http://healthvermont.gov/hc/imm/provider.aspx>

Immunization Opportunities

Many children are seen in provider offices in the summer for well-child visits, sport physicals, mild illnesses and mild trauma. Carpe diem! Use this opportunity to make sure a child is up to date with their immunizations.

In 2008, the Immunization program began to conduct adolescent immunization assessments to determine the compliance with Advisory Committee on Immunization Practice (ACIP) Recommendations for adolescents. We assessed the coverage rates in 14 practices, on children between the ages of 13-17 years who had received 3 Hepatitis B, 2 MMR, 1 Td/Tdap, 1 meningococcal and 1 Varicella. The average immunization coverage level for those 14 practices assessed was 22%. The lowest being 0%, meaning none of the children assessed at that practice were up to date and the highest practice we assessed was 66%. This year we are again assessing adolescent immunization rates by looking at 3 Hepatitis B, 2 MMR, 1 Td/Tdap, 2 Varicella, 1 Meningococcal and for females only, 3 HPV in 13-17 year olds. When you see adolescents this summer please check to see if they need a vaccination. Many times it is assumed this population is up to date with their immunization but most likely they are not. Use a summer visit as an opportunity to update immunizations.

Updates from the VDH's Immunization Program

Email: Communication between the Immunization Program and practices now includes e-mail. Recently a request went out to provider offices regarding e-mail addresses. A majority of practices responded and the Immunization Program will be utilizing this form of communication more in the coming months. If you did not reply or did not receive a request for information, but would like to be on our e-mail list please send us an e-mail at immunizationprogram@vdh.state.vt.us

New Coolers: Vaccine will be arriving in a new box. Our vaccine distributor, McKesson Specialty, is phasing in a new shipping cooler at the end of June. The most notable change is that they no longer want you to ship empty coolers back to them. You should keep a cooler for returning expired or non-viable vaccine, but recycle all other coolers. Another change is that the coolers will not have a McKesson shipping label attached. When you need to return vaccine to McKesson you will have to call the VT Immunization Program for a return authorization form, a shipping label, and to have us schedule a UPS pickup through McKesson. McKesson will no longer take calls scheduling a UPS pickup from practice offices, only from State programs.

Refrigerators: As of January 1st 2010 "dormitory-style" refrigerators will no longer be allowed for permanent storage of vaccine. This is a change in CDC storage and handling requirements and for many practices in Vermont still an issue. To help alleviate the financial burden of this change the Vermont Department of Health in collaboration with the Vermont Medical Society will be offering an opportunity to receive a rebate for the purchase of a new vaccine refrigerator. More news on this and the specifics on how to apply will be ready to share in July.

H1N1 Vaccine: Currently the Centers for Disease Control and Prevention (CDC) anticipates that both seasonal influenza vaccine and H1N1 vaccine will be recommended this fall. As details become available the VDH will provide further guidance to providers and the public.

Have an immunization topic that you would like to write about?

Let us know, we love when a provider contributes to Vaccinate Vermont!