



## MESSAGE FROM THE SECTION ADMINISTRATOR

**Robert M. Griffin**

Welcome to the Fall 2016 edition of IMMU-NEWS!

Seasons come and seasons go... Fall is upon us already as we prepare for another season of football, fall festivities, holidays, and spending time with family and friends. This time of year is notorious for the dreaded flu, pertussis and pneumonia. As we all enjoy the cooler weather—and time with family and friends—we all need to protect ourselves and the ones we love with vaccinations and proper hygiene to prevent the spread of vaccine-preventable diseases.

World pneumonia day is observed on November 12th for 2016. This year's outreach focuses on protection and prevention. Pneumonia is the world's leading infectious killer of children under age 5. Prevention is always better than treatment!

Read ahead for information on flu and pneumonia prevention, current immunization outreach events, and program and vaccine updates.

The Immunization Section has had a few staff changes to share. Megan Sweet has been promoted to Government Operations Consultant III and now leads the Florida Shots Helpdesk team. Megan previously worked for the Vaccines for Children (VFC) program. Congratulations to Megan on her promotion! We would like to welcome Detroit Reynolds and Steven Firestone to the Florida SHOTS Helpdesk team. Detroit has joined the team as an Operations Analyst and Steven has joined the team as a Training Consultant. In addition, Monica Livengood has joined the Refugee Health program as a RN Consultant. Monica holds a MPH, BSN, and CPH. Monica previously worked for the Department on the county level. Welcome aboard Detroit, Steven, and Monica—we look forward to working with all of you!

Enjoy this issue of IMMU-NEWS, and visit us online at [ImmunizeFlorida.org](http://ImmunizeFlorida.org)!

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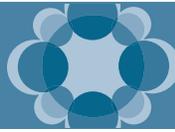
Keep the Promise. Stop Pneumonia Now. **November 12th.**

[www.stoppneumonia.org](http://www.stoppneumonia.org)

***Protect yourself and your community. Get vaccinated!***



IMMU-NEWS is a publication of the:  
Immunization Section  
Division of Disease Control and Health Protection  
Florida Department of Health



## CDC Coverage Award Presented to Florida Department of Health–Immunization Section

This year, the Centers for Disease Control and Prevention (CDC) hosted the 47th National Immunization Conference (NIC) in Atlanta, Georgia from September 13–15, 2016. The NIC brings together a wide variety of local, state, federal, and private-sector immunization partners to explore science, policy, education, and planning issues related to immunizations in general and vaccine-preventable diseases. During the event, the Florida Department of Health–Immunization Section received the *CDC Immunization Coverage Award* for most improved influenza coverage rate among adults aged 18 years and older from years 2012–2015.



(Left to right) Montique Shepherd II, MPA, CDC PHA; Beth Cox, DOH VFC Program Manager; Dearline Thomas-Brown, MPH, BSN, RN, DOH Clinical/QI Executive Community Health Nursing Director; Tracey Andrews, MPH, CDC PHA; Nancy Messonnier, MD CAPT, USPHS, Director, National Center for Immunization and Respiratory Diseases OI, CDC

## 2017 Florida Immunization Summit

The second annual Florida Immunization Summit is scheduled for February 2–4, 2017, and will focus on adolescent vaccines. Early bird registration is open, and there is now a call for poster presentations. The event will bring together health professionals, advocates, students and more for an in-depth, interdisciplinary conference focusing on best practices to promote adolescent vaccines and eliminate vaccine-preventable disease. Throughout the three-day summit, attendees will have the opportunity to learn from experts on the most up-to-date national and state statistics and vaccine guidance.

To register, go to [stellared.learningexpressce.com/index.cfm?fa=view&eventID=6604](http://stellared.learningexpressce.com/index.cfm?fa=view&eventID=6604).

For additional information, please contact Dearline Thomas-Brown, MPH, BSN, RN at 850-245-4342 or Andrea Peaten at 727-824-6998.

## 2016 Zika Virus Outbreak and Response

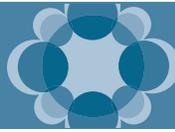
As Zika Virus continues to remain a hot topic, here is what you need to know if you live in Florida:

- Zika Virus can be transmitted through mosquito bites, from a pregnant woman to her fetus, sex, and blood transfusions
- Florida currently has 708 travel associated cases and 139 locally acquired cases (according to [www.cdc.gov/zika/geo/united-states.html](http://www.cdc.gov/zika/geo/united-states.html))
- The best way to prevent Zika is to prevent mosquito bites by using an EPA-registered insect repellent, wearing long-sleeved shirts and long pants, stay in spaces with air conditioning or window/door screens, and removing standing water around your home
- Pregnant woman have been advised not to travel to areas with Zika, and if you must travel to one of these areas, talk to your health care provider first and strictly follow steps to prevent mosquito bites

For Department of Health Daily Zika Updates, go to: [www.floridahealth.gov/newsroom/2016/11/111416-zika-update.html](http://www.floridahealth.gov/newsroom/2016/11/111416-zika-update.html).

## Standard Abbreviations in This Issue

- ACIP: Advisory Committee on Immunization Practices
- CDC: Centers for Disease Control and Prevention
- DTaP: Diphtheria, Tetanus, and acellular Pertussis
- DOH: Florida Department of Health
- FCAAP: Florida Chapter American Academy of Pediatrics
- FL CHAIN: Florida Community Health Action Information Network
- Florida SHOTS™: Florida State Health Online Tracking System
- IAC: Immunization Action Coalition
- MMR: Measles, Mumps, and Rubella
- MMRV: Measles, Mumps, Rubella, and Varicella
- Tdap: Tetanus, diphtheria, and acellular pertussis
- VFC: Vaccines For Children



## The Flu Vaccine: Protection From The Flu—Peace Of Mind For You

As a parent, you feel helpless when your child is sick and flu can hit children hard, leaving them feeling miserable. Symptoms include fever, chills, runny or stuffy nose, muscle or body aches, and fatigue. Sadly, every year some children are hospitalized and die from flu complications. Why not do everything you can to help protect your children against the flu this season? You can start by getting them vaccinated.



A flu vaccine is the best way to protect against the flu and everyone can benefit from that protection. The CDC recommends that everyone 6 months and older get a flu vaccine every year. That includes all children from babies 6 months and older to teens, to parents, to everyone who comes in contact with children.

A flu vaccine is especially important for children younger than 5 years old and children of any age with certain chronic health conditions such as asthma, diabetes or neurologic disorders. Those children are at high risk of getting serious complications from flu, like pneumonia, which can lead to hospitalization and even death.

Each year about 20,000 children younger than 5 years old are hospitalized from flu complications. Since 2004-2005, flu-related deaths in children reported to CDC during regular flu seasons have ranged from 37 deaths (2011–2012) to 171 deaths (2012–2013). Influenza-related deaths in children are tragic. Even more tragic is the fact that past data indicate that among children 6 months and older, 80 to 85 percent of flu-related pediatric deaths occurred in children who have not received a flu vaccine. During the 2015–2016 season, some reported flu-associated deaths occurred in children who had an underlying medical condition that placed them at high risk of developing serious flu complications, but about 60 percent were otherwise healthy, underscoring the fact that even healthy children can become very ill from flu.

Flu vaccination is the best weapon we have to protect against flu. A flu shot can have mild side effects, such as soreness or swelling where the vaccine was received, a mild fever, or body aches. While these side effects can be uncomfortable and inconvenient, they are mild and usually resolve quickly. While flu vaccine can vary in how well it works each year, the vaccine does protect against illness and can prevent serious flu outcomes like hospitalization.

“Parents who take the time to get their children vaccinated can rest a little easier knowing they are helping to protect their family against an illness that can have serious complications,” says Dr. Daniel Jernigan, Director of the Influenza Division in the National Center for Immunization and Respiratory Diseases (NCIRD) at the CDC. “Of course parents should get vaccinated, too.”

Children, and everyone else, should get a flu vaccine by the end of October, if possible. Since it takes about two weeks after vaccination for the antibodies that protect against influenza virus infection to develop in the body, it is best that people get vaccinated early in the season so they are protected before flu viruses begin spreading in their community. However, as long as flu viruses are circulating, vaccination can still be beneficial, even in January or later. Flu viruses can continue spreading as late as May. Keep in mind that the flu vaccine does not provide protection against non-flu viruses that can cause colds and other respiratory symptoms similar to those caused by flu.

For many children, one flu shot will be sufficient this season, but some children between the ages of 6 months and 8 years may require two doses of flu vaccine given at least four weeks apart. This includes all children in this age group who are getting vaccinated for the first time and children who have only ever received one dose in their lifetime. Your child’s health care provider can tell you whether your child needs two doses in order to be fully protected against the flu. Children needing two doses of vaccine should start the process early enough that two doses can be given before flu season starts.

Babies younger than 6 months are too young to get a flu vaccine, but they are at high risk for complications, including hospitalization and death, if they become very sick from the flu. Therefore, it is important that pregnant women, family members and anyone who cares for young infants get vaccinated to help prevent the spread of flu viruses to young babies.

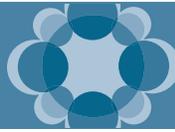
Help put your mind at ease by protecting your child against flu this season. Flu vaccines are offered in many convenient locations. For example, you and your child can get vaccinated at your doctor’s office, local health clinics, flu clinics at local retail outlets, and pharmacies. However, pharmacists can only give adult vaccines. Use the vaccine finder at [vaccine.healthmap.org/](http://vaccine.healthmap.org/) to find where you can get flu vaccine near you.

Since October 2013, more Americans, even those with preexisting conditions, have qualified for health insurance coverage that fits their budget and needs. It includes many free screenings, vaccinations, and counseling. Visit [www.healthcare.gov](http://www.healthcare.gov) or call 1-800-318-2596 to learn more.

For more information about flu and the benefits of the flu vaccine, talk to your doctor or nurse, visit the CDC flu website at [www.cdc.gov/flu](http://www.cdc.gov/flu) or call CDC at 1-800-CDC-INFO (800-232-4636).

**DON'T GET THE FLU.  
DON'T SPREAD THE FLU.**

**GET VACCINATED.**



## Immunization Training For Medical Professionals

The Broward County Immunization Action Coalition is sponsoring its semi-annual *Immunization Training for Medical Professionals* on November 16, 2016 from 1:30 p.m. – 5:00 p.m. at the Florida Department of Health (FDOH) offices (Tobacco Prevention Building) in Ft. Lauderdale. The target audience is professionals providing health and immunization services for the pediatric population in Broward County.

The agenda and speakers are as follows:

- **Welcome and Introductions**  
(1:30 p.m.–1:45 p.m.)  
Jacqueline Senior, Regional Immunization Field Staff Manager - FDOH
- **Certificates of Appreciation for “Assess the Best” Campaign**  
(1:45 p.m. – 2:00 p.m.)  
Recipients: Gallagher Pediatrics and South Florida Pediatric Partners. Both practices have significantly increased the rate of the administration of the second dose of the meningococcal vaccine and the first dose of the HPV vaccine – Bob La Mendola, Community Affairs at the FDOH in Broward County
- **Flu and Zika Virus – What You Need to Know**  
(2:00 p.m. – 2:20 p.m.)  
Patrick Jenkins, Communicable Diseases Director at the FDOH in Broward County
- **Florida SHOTS**  
(2:20 p.m. – 3:05 p.m.)  
Fatima Aviles, Immunization Field Trainer/Coordinator at the FDOH
- **Hepatitis B Virus Prevention in the Pediatric Population**  
(3:05 p.m. – 3:25 p.m.)  
Deborah M. Kahn, RN – Community Health Nursing Consultant – FDOH Immunization Section
- **Vaccine Preparation – Best Practices**  
(3:25 p.m. – 3:45 p.m.)  
Joanne Christopher-Hines, Mobile Health Center Manager at Joe DiMaggio Children’s Hospital
- **Vaccine Storage, Handling and Emergency Protocols**  
(3:45 p.m. – 4:10 p.m.)  
Ray Ramirez, Director of Clinical Services for Pediatric Associates (corporate)
- **Role Play: Changing the Conversation with Parents**  
(4:10 p.m. – 4:30 p.m.)  
Ray Ramirez, Director of Clinical Services for Pediatric Associates (corporate), Janet Jones, Immunization Outreach Coordinator at Holy Cross Hospital, Mark Niemann, Representative for Merck Pharmaceuticals

- **Question and Answer/Closing Remarks, Participant Surveys, Certificates of Completion**  
(4:30 p.m. – 4:45 p.m.)

This training is free, and all local medical professionals with an interest are welcome to attend.

For additional information, email [Kayla.Fernandez@flhealth.gov](mailto:Kayla.Fernandez@flhealth.gov).

## Chi Theta Zeta Chapter of Zeta Phi Beta Sorority, Inc. Hosts 8th Annual Community Baby Shower

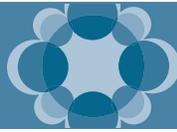
Chi Theta Zeta chapter of Zeta Phi Beta Sorority Inc., hosted its 8th annual Community Baby Shower in partnership with March of Dimes, City of Tallahassee, Capital Area Healthy Start, FAMU Health, Florida Department of Health, and numerous other organizations on September 17, 2016, from 10 a.m. to 2 p.m. at Jack McLean Community Center located in Tallahassee.

The Community Baby Shower is designed to educate women and their families in the community regarding prenatal care, infant care including immunizations, planning for pregnancy both physically and financially, emergency planning including infant-child CPR demonstrations, cooking demonstrations, and other health-related topics to reduce the risk of premature birth and infant mortality. The event concludes with numerous give-a-ways of baby items such as car seats, strollers, cribs, infant clothing, diapers, and more. This annual event is always free and open to all!



*Dearline Thomas-Brown, MPH, BSN, RN, Executive Community Health Nursing Director, DOH-Immunization Section*





## Pertussis

Pertussis, also referred to as Whooping Cough, is a highly contagious respiratory tract infection caused by the bacterium *Bordetella pertussis* and is easily preventable by vaccine. DTaP is a vaccine that includes antibodies for diphtheria, tetanus and acellular pertussis. Pertussis is particularly dangerous for infants who are too young to receive the complete vaccine series of DTaP. The CDC recommends five doses with the last dose being given on or after the 4th birthday. In Florida, four to five doses are required before children enter kindergarten.

Pertussis is spread by respiratory droplets through coughs and sneezes, by saliva through kissing or sharing drinks and by skin to skin contact like handshakes and hugs. Pertussis is treated with antibiotics prescribed by a health care practitioner. Symptoms may include a cough, runny nose, nasal congestion and sneezing. A paroxysmal cough is associated with pertussis and causes uncontrollable, violent coughing often making it difficult to breathe. After the coughing fit, the infected person often needs to take deep breaths which results in a “whooping” sound.

Persons with pertussis are most infectious during the onset of cold symptoms including runny nose, nasal congestion, sneezing, and following the first two weeks after cough onset. Communicability then decreases, but may continue for three or more weeks after the paroxysmal cough onset. Therefore, cases are contagious from symptom onset through twenty-one days after the start of the cough, or until completion of five days of appropriate antibiotic therapy.

The CDC recommends that all pregnant women receive a Tdap booster during their third trimester of pregnancy and during each pregnancy. The amount of pertussis antibodies in the body decreases over time. Antibody levels may not remain high enough to provide protection for future pregnancies. Receiving the vaccine during the third trimester helps provide passive immunity onto the infant after birth. The first few months of life are when the infant is at the greatest risk for becoming infected with pertussis and having severe, potentially life-threatening complications. By breastfeeding, a mother may pass some antibodies made in response to the vaccine onto the infant. If a pregnant woman does not receive a Tdap vaccination during pregnancy, it is recommended that they receive one immediately post-partum.



*Cocooning* is promoted in birthing hospitals in Florida. It involves the vaccination of health care personnel and all close contacts of the infant with the Tdap vaccine. Ideally, these individuals should receive Tdap at least two weeks prior to close contact with the infant. Cocooning has been recommended from the ACIP since 2005.



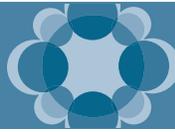
Laboratories and physicians are required to report cases of pertussis to their local county health department immediately 24/7. Due to the highly contagious nature of pertussis, investigations should begin within one working day.

Routine vaccination is still the most successful method of controlling pertussis infection. Due to the increase in parents who delay



vaccination for their children or refuse all vaccinations, the incidence of pertussis has increased over recent years even though vaccines are available to all children in the U.S. regardless of income or insurance coverage through the Vaccines for Children (VFC) federal program.

Please be sure to discuss your vaccination status at each doctor’s appointment to ensure that you are up-to-date on all your vaccinations to help limit the spread of vaccine preventable diseases.



## New Florida SHOTS Website Offers Improved User Experience

Florida SHOTS is pleased to debut an upgraded website at [www.flshots.com](http://www.flshots.com) that will improve the way you experience and interact with the registry. The new and improved site launched in August.

When the first Florida SHOTS website was developed in 2004, it focused on practices that provided vaccine services to infants and toddlers. The past dozen years have been an exciting time of transformation and growth for the registry in terms of patients, users, and functionality. The new and improved website reflects this growth.

The site makes using the Florida SHOTS registry easier than ever before. When you land on its homepage, you'll now find dedicated tabs for specific audiences:

- parents and schools
- health care providers
- software providers

By clicking on the appropriate tab, diverse audiences can easily access information and resources specific to their needs.

The new website also taps into the vast amount of functionality Florida SHOTS has added over the years. Providers can access resources to take advantage of services such as real-time data exchange, as well as VFC inventory ordering and tracking. Additionally, provider training tools and resources are now just a mouse click away 24/7. Dedicated tabs provide access to live online training as well as recorded webinars and training guides. Instant access to information about VFC temperature data loggers and 680 forms is also available. Site resources and training materials are provided in Spanish as well as English.

The website's design allows for streamlined menus, clear navigation, and a responsive layout for all platforms, such as mobile and tablets. We encourage you to check out the site for yourself and see how the Florida SHOTS user experience has improved.



## Orlando Health Summit

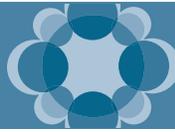
Robert Colon, Immunization Consultant, DOH-Area 5 and TracyAnn Valle, Immunization Analyst, also DOH-Area 5, participated in the *14th Annual Caribbean Health Summit* in Orlando on September 10th. Robert and Tracy represented the Department with a display table and numerous informational outreach materials. They spoke with participants about HPV disease and distributed information on HPV and influenza.



TracyAnn Valle, Immunization Analyst, DOH-Immunization Section Area 5 Field Staff

## Vaccine Information Statements Updated August 9, 2016

- DTaP (5/17/07)
- Hepatitis A (7/20/16) **UPDATED**
- Hepatitis B (7/20/16) **UPDATED**
- Hib (*Haemophilus Influenzae* type b) (4/2/15)
- HPV - Cervarix (5/3/11) [Interim]
- HPV - Gardasil-9 (3/31/16) **UPDATED**
- HPV - Gardasil (5/17/13) [Interim]
- Influenza - Live, Intranasal (8/7/15)
- Influenza - Inactivated (8/7/15)
- Measles/Mumps/Rubella (MMR) (4/20/12) [Interim]
- Measles/Mumps/Rubella & Varicella (MMRV) (5/21/10) [Interim]
- Meningococcal ACWY (MenACWY and MPSV4) (3/31/2016)
- Serogroup B Meningococcal (MenB) (8/9/16) **UPDATED**
- Pneumococcal Conjugate (PCV13) (11/5/15)
- Pneumococcal Polysaccharide (PPSV23) (4/24/15)
- Polio (7/20/16) **UPDATED**
- Rotavirus (4/15/15)
- Shingles (Herpes Zoster) (10/06/09)
- Tdap (Tetanus, Diphtheria, Pertussis) (2/24/15)
- Td (Tetanus, Diphtheria) (2/24/15)
- Varicella (Chickenpox) (3/13/08) [Interim]



## Pneumonia

Pneumonia is an infection of the lungs that can be caused by bacteria, viruses and fungi. Most viral cases of pneumonia are the result of influenza and respiratory syncytial virus (RSV); and a common cause of bacterial pneumonia is *streptococcus pneumoniae*. Pneumonia is the leading cause of death among children younger than five years of age worldwide. Pneumonia infections vary between persons and can result in mild to severe infection. Symptoms of pneumonia include the following:

- Fever (abrupt onset)
- Chills
- Chest pain
- Difficulty breathing (dyspnea), rapid breathing (tachypnea), and absence of adequate oxygen in blood (hypoxia)
- Productive cough
- Rapid heartbeat (tachycardia), general discomfort (malaise), weakness

Treatment of pneumonia may include medical interventions such as the infusion of fluids and antibiotics via the intravenous (IV) route; oxygen therapy and breathing treatments.

Two types of pneumococcal vaccines are available to decrease the risk of developing pneumonia infections. Pneumococcal polysaccharide vaccine (PPSV 23) contains polysaccharide antigen for 23 types of pneumococcal bacteria.

Pneumovax 23 is the polysaccharide vaccine currently available in the United States; it can be administered via the intramuscular or subcutaneous route. PPSV23 is recommended to be administered to adults 65 years of age and older. PPSV23 should also be administered to children 2 years of age and older with the following conditions:

- Chronic illness
- Anatomic or functional asplenia
- Immunocompromised (due to disease, chemotherapy, steroids)
- HIV infection
- Settings where increased risk of infection may occur
- Cochlear implants
- Cerebral spinal fluid (CSF) leaks



Pneumococcal conjugate vaccine (PCV13) contains seven serotypes of *streptococcus pneumoniae* in addition to serotypes 1, 3, 5, 6A, 7F and 19A. Prevnar-13 is licensed in the U.S. and is routinely administered to children ages 2 through 59 months of age. The routine primary series of PCV13 are administered at 2, 4, and 6 months of age; although it can be administered as early as age 6 weeks. The 4th dose is recommended to be administered at 12–15 months of age.

The following guidelines should be followed regarding the administration of PCV13 and PPSV23 among adults age 65 years and older:

- PCV13 should be administered to anyone 65 years of age and older that has not previously received a dose of PCV13.
- PCV13 should not be administered simultaneously with PPSV23.
  - PPSV23 should be administered 6–12 months after the dose of PCV13 in adults 65 years and older.
  - Adults who previously received a dose of PPSV23 should receive PCV13 no earlier than one year after the dose of PPSV23.

Please refer to the Advisory Committee on Immunization Practices (ACIP) *Recommended Adult Immunization Schedule, United States 2016* regarding the revaccination of high-risk immunocompetent persons and highest-risk persons.

In addition to pneumococcal vaccines, there are other vaccines available that provide protection against infections caused by bacteria or viruses that cause pneumonia. These vaccines include:

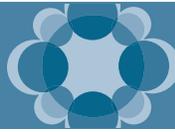
- *Haemophilus influenzae* type B (Hib)
- MMR
- Varicella
- Pertussis
- Influenza (flu)

In summary, pneumonia may be prevented by practicing good hand hygiene, disinfecting frequently touched surfaces, managing medical problems, smoking cessation, and receiving recommended vaccinations.

(Adapted from Epidemiology and Prevention of Vaccine-Preventable Diseases online [www.cdc.gov/vaccines/pubs/pinkbook/pneumo.html#medical](http://www.cdc.gov/vaccines/pubs/pinkbook/pneumo.html#medical) and Centers for Disease Control and Prevention at [www.cdc.gov/pneumonia/](http://www.cdc.gov/pneumonia/).)



Keep the Promise. Stop Pneumonia Now. **November 12th.**  
[www.stopppneumonia.org](http://www.stopppneumonia.org)



## Emergency Vaccine Management Plan: Vaccines for Children (VFC) Program

REMINDER: Due to the recent hurricanes impacting Florida and causing turbulent weather conditions, the VFC Program would like to remind providers to please follow their Emergency Response Plan accordingly. Remember these points:

- Vaccines should only be transported when absolutely necessary
- For providers who plan to store vaccines at an off-site location during an emergency, it is highly recommended that contact is made with the storage site at least twice per year to verify that the agreement is still in place
- Please remember to follow proper storage and handling procedures while transporting and storing the vaccines at the backup location
- Keep the continuous temperature monitoring device with the VFC vaccines during transport and temporary storage off site
- Shipping of VFC vaccines by a provider is **NOT Permitted**



If you have specific questions, you may contact the VFC Program via email at [FloridaVFC@FLHealth.gov](mailto:FloridaVFC@FLHealth.gov), your assigned VFC Program representative's email or via phone at 1-800-483-2543.

A template emergency plan and other forms can be found on our website at: [www.floridahealth.gov/programs-and-services/immunization/vaccines-for-children/provider-forms.html](http://www.floridahealth.gov/programs-and-services/immunization/vaccines-for-children/provider-forms.html).

## 9th Annual SW Florida Immunization Workshop

The *9th Annual SW Florida Immunization Workshop* planning is underway. The workshop is scheduled for Thursday, May 18, 2017 from 9:00 a.m.–3:30 p.m. with workshop registration scheduled from 8:00 a.m.– 9:00 a.m. at the State College of Florida at Lakewood Ranch in Sarasota.

A draft workshop agenda will be posted on the Florida LINC website once it is available.

Free nursing Continuing Education Units (CEUs) and lunch will be provided.

## Collier—Lee 2nd Annual South Florida Immunization Workshop

The Collier and Lee Immunization Coalition is planning to conduct the *2nd Annual South Florida Immunization Workshop* on Saturday, March 11, 2017 at Hodges University in North Naples. It will be a full day event with free nursing CEUs and lunch will be provided.

The Collier and Lee Immunization Coalition will be meeting on Thursday, November 17, 2016 to finalize a tentative workshop agenda and to determine exact times of the workshop. A draft workshop agenda will be submitted to Florida LINC for posting on the website once it is available.

If you would like to be added to the Immunization Section's mailing list and receive **IMMU-NEWS** electronically via email, please visit our mailing list registration page at: [www.floridahealth.gov/programs-and-services/immunization/ mailing-list.html](http://www.floridahealth.gov/programs-and-services/immunization/ mailing-list.html).



