MESSAGE FROM THE SECTION ADMINISTRATOR

CHARLES H. ALEXANDER

Welcome to the Spring edition of IMMU-NEWS.

You can certainly tell spring has sprung in Florida. The wind rustling trees and bushes have colored the landscape in neon yellow dust. Yes, pollen is in the air flying alongside the birds and the bees, to settle on everything in sight. Allergens may be at their peak, but that doesn’t stop folks from getting outside and enjoying the beautiful weather.

We are pleased to share with you our most important spring activity. National Infant Immunization Week (NIIW) is April 26-May 3, 2014. Hundreds of communities across the United States will join those in countries around the world to celebrate the critical role vaccination plays in protecting our children, communities, and public health. NIIW will be celebrated this year simultaneously with World Immunization Week, an initiative of the World Health Organization. This worldwide annual health observance is featured in this issue.

As a reminder of how important immunizations are—consider measles. While measles have almost been eradicated in the United States, it kills thousands of people every year around the world. This issue takes a look at measles, a vaccine-preventable disease, on the rise in the U.S.

It is not too early to start planning for next year’s school immunizations. The Immunization Guidelines for Florida Schools, Childcare Facilities and Family Daycare Homes is a reference for required immunization and documentation questions. These guidelines describe the requirements for compulsory immunizations for admittance and attendance. Flyers highlighting the changes to the compulsory vaccinations for the 2014-2015 school year are now available in English, Spanish and Haitian-Creole for downloading. Visit www.floridahealth.gov/prevention-safety-and-wellness/immunization/children-and-adolescents/schedules-and-requirements/index.html for the Guidelines and school flyers.

The Immunization Section would like to congratulate Robert Griffin on his promotion to Budget and Registry Services Director. Congrats Bob! We would also like to welcome a former FDOH employee, Candis Pesquera. Candis is joining our Field Staff as an Immunization Consultant for Area 2. Welcome back Candis, and we look forward to working with you again!

Enjoy this issue of IMMU-NEWS and visit us at ImmunizeFlorida.org!
National Infant Immunization Week

National Infant Immunization Week (NIIW), set for April 26–May 3, 2014, is an annual observance to highlight the importance of protecting infants from vaccine-preventable diseases and celebrate the achievements of immunization programs and their partners in promoting healthy communities.

2014 marks the 20th anniversary of NIIW. Since 1994, hundreds of communities across the United States have joined together to celebrate the critical role vaccination plays in protecting our children, communities, and public health.

6th Annual SW Florida Immunization Workshop

Constructively Addressing Parental Vaccine Hesitancy

Free Nursing Continuing Education. Lunch and snacks will be provided!!! Vendor displays, door prizes, and more!!!

Registration will be between 8:00 a.m.–8:55 a.m.

REGISTER NOW AT: www.planetreg.com/E11782711350

WHEN: Thursday, May 22, 2014
TIME: 9:00 AM – 3:30 PM
WHERE: State College of Florida (SCF) at Lakewood Ranch in Sarasota
www.scf.edu/AboutSCF/Locations/SCFLakewoodRanch/

Driving Directions:
www.scf.edu/AboutSCF/Locations/SCFLakewoodRanch/CIT/DrivingDirections.asp

Speakers and Presenters:

• Donna Weaver, RN, MN, CDC Nurse Educator, Keynote Speaker: Changes to Immunization Recommendations and Current Thoughts on Addressing Vaccine Hesitancy
• Shirley Jankelevich, MD, Pediatric Specialist, All Children’s Hospital: Views on Immunizations and viewing of the film, Invisible Threat
• Michael Drennon, MPH, FDOH–Sarasota: Vaccine Preventable Disease Outbreak Control Case Scenario
• Kennan Ferrar, Florida SHOTS: Updated Information and Bi-directional Data Flow Between EHRs (electronic health records) and Florida SHOTS
• TB and HIV/AIDS Program Representatives, FDOH: Meeting Key Public Health Goals Through Community Partnerships
• David Fee, MEd, CHES, and Lori Wright, FDOH–Immunization Section Field Staff members: School and Childcare Immunization Attendance Requirements for 2014-2015

For more information contact: David Fee at 239-461-6115 or email David.Fee@flhealth.gov, or Lori Wright at 850-528-5137 or email Lori.Wright@flhealth.gov

Standard Abbreviations in This Issue

• ACIP: Advisory Committee on Immunization Practices
• CDC: Centers for Disease Control and Prevention
• DTaP: Diphtheria, Tetanus, and acellular Pertussis
• FDOH: Florida Department of Health
• Florida SHOTS™: Florida State Health Online Tracking System
• HIBIG: Hepatitis B Immune Globulin
• Hib: Haemophilus influenzae type B
• HPV: Human Papillomavirus
• IAC: Immunization Action Coalition
• MCV: Meningococcal Conjugate Vaccine
• MMR: Measles, Mumps, and Rubella
• MMRV: Measles, Mumps, Rubella, and Varicella
• MPSV: Meningococcal Polysaccharide Vaccine
• PCV13: Pneumococcal Conjugate Vaccine
• PPSV: Pneumococcal Polysaccharide Vaccine
• Tdap: Tetanus, diphtheria, and acellular pertussis
• VFC: Vaccines For Children
2014 National Adult and Influenza Immunization Summit

The 2014 face-to-face annual meeting of the National Adult and Influenza Immunization Summit (NAIIS) will be held in Atlanta, Georgia, at the Hyatt Regency Hotel on May 13–15, 2014.

The National Adult and Influenza Immunization Summit was founded by the American Medical Association (AMA) and the Centers for Disease Control and Prevention (CDC). Currently the NAIIS is led by the Immunization Action Coalition (IAC), the CDC, and the National Vaccine Program Office (NVPO). The NAIIS is dedicated to addressing and resolving adult and influenza immunization issues.

The NAIIS now consists of over 400 partners, representing more than 100 public and private organizations. Summit participants include a wide range of professionals from the health care industry, public health and private medical sectors, vaccine manufacturers and distributors, consumers, and others interested in stopping the transmission of vaccine-preventable diseases.

For more information regarding the summit go to: www.izsummitpartners.org/.

Importance of Measles Mumps Rubella Vaccine in the United States Today

“21 Measles Cases Linked To Megachurch In Texas”

“NYC Measles Outbreak Spreads To Lower East Side”

“North Carolina Measles Outbreak Increases To 19 Cases”

Each year about 60 people in the United States are reported to have measles. But in 2013, 189 people were reported to have the disease. This represents the second largest number of cases in the U.S. since measles was eliminated in 2000. About 28% of these people got measles in other countries. They brought the disease to the United States and spread it to others. This caused 11 measles outbreaks in various U.S. communities, including the largest U.S. measles outbreak since 1996, which occurred in NYC (58 cases). Headlines from some of the outbreaks can be seen above.

Measles was declared eliminated from the United States in 2000, so the disease no longer spreads year round in this country. But it is still common throughout the world, including some countries in Europe, Asia, the Pacific, and Africa. Anyone who is not protected against measles is at higher risk of getting infected when they travel internationally. They can bring measles to the United States and infect others. Unvaccinated people put themselves and others at risk for measles and its serious complications.

Measles can be prevented by the combination MMR (measles, mumps, and rubella) vaccine. To prevent measles, children (and some adults) should be vaccinated with the measles, mumps, and rubella (MMR) vaccine. Two doses of this vaccine are needed for complete protection. Children should be given the first dose of MMR vaccine at 12 to 15 months of age. The second dose can be given 4 weeks later, but is usually given before the start of kindergarten at 4 to 6 years of age. Students entering middle school, high school, or college should have their vaccination records reviewed to make sure they have received both doses of the MMR vaccine.

Outbreaks continue to occur in high schools and on college campuses. These educational institutions are potential high-risk areas for measles transmission because of large concentrations of susceptible people. That is why the CDC recommends that all states require proof of either two doses of the measles vaccine or evidence of past measles infection at the time of college or other post-high school entry.

Adults born after 1957 should receive at least one dose of measles vaccine unless they have already had measles and are immune. (This vaccine is given as measles mumps rubella (MMR) vaccine). Those at increased risk of getting measles—college students, international travelers and health care workers—should receive two doses, provided they are given no less than 28 days apart.

People traveling outside of the United States are at increased risk of exposure to measles and should have evidence of measles immunity. This disease is quite common in many countries throughout the world. The CDC recommends that travelers who are not immune to measles receive two doses of the MMR vaccine for their own protection and to prevent importation of the measles virus into the United States.

Before any international travel, infants 6 months through 11 months of age should have at least one dose of MMR vaccine. Children 12 months of age or older should have two doses separated by at least 28 days. Adults should review their vaccination records to ensure they are up-to-date. The links below provide valuable information to help travelers protect themselves and others from measles.

Children, teenagers, and adults should be up-to-date on their measles vaccination, including before they leave for international travel or go off to college. For more information, visit www.cdc.gov/measles.
The New York Times Publishes Editorial on the Seriousness of Measles by Dr. Paul Offit

On March 27, The New York Times published an editorial by Dr. Paul Offit, MD and Director of the Vaccine Education Center for the Children’s Hospital of Philadelphia. The article, Remembering How to Fight Measles, stresses how serious and contagious measles is, and how parental vaccine refusal and loose exemption laws have contributed to this disease’s reemergence in the United States.

For more information on measles, please visit the following web sites:
IAC: www.immunize.org/measles/
CDC: www.cdc.gov/measles/

Meningococcal Vaccination Recommendations

Meningococcal disease is a serious and potentially life-threatening infection caused by the bacterium Neisseria meningitidis. Common symptoms of meningococcal disease include high fever, neck stiffness, confusion, nausea, vomiting, lethargy, and/or petechial or purpuric rash. Without appropriate and urgent treatment, the infection can progress rapidly and result in death.

There are four meningococcal vaccines currently available in the United States.

A quadrivalent meningococcal polysaccharide vaccine (MPSV4, Menomune by Sanofi Pasteur) was licensed in 1981 for people ages 2 years and older. It protects against four serogroups of meningococcus—A, C, Y, and W-135.

The first quadrivalent meningococcal conjugate vaccine (MCV4, Menactra by Sanofi Pasteur) was licensed in 2005 and is approved for persons age 9 months through 55 years.

A second quadrivalent conjugate vaccine (MCV4, Menveo by Novartis) was licensed in 2010 and is approved for persons age 2 months through 55 years.

A bivalent conjugate meningococcal vaccine containing serogroups C and Y combined with Haemophilus influenzae type b vaccine (MenHiBrix by GlaxoSmithKline) was licensed in 2012 for children age 6 weeks through 18 months.

Either MPSV4 or MCV4 can be given to a person age 56 years or older, according to the recommendations of CDC’s Advisory Committee on Immunization Practices. The clinician will decide which vaccine is appropriate depending on individual circumstances.

Meningococcal conjugate vaccines are believed to give better protection and are more effective in young children than the polysaccharide vaccine. Unfortunately, no U.S. licensed vaccine protects against meningococcal serogroup B which causes about one third of all meningococcal disease in the United States. About 60% of meningococcal disease in infants age one year or younger are caused by serogroup B.

In February 2014, the IAC published Meningococcal Vaccination Recommendations by Age and/or Risk Factor. View the publication in pdf format by clicking the document below:

For additional information, please visit the IAC’s website by clicking the following link:
IAC: Meningococcal: Questions and Answers

Community Health Centers of Leesburg Presented Certificate of Achievement

The Immunization staff has worked diligently this past year to make immunizations a stand out at Community Health Centers of Leesburg. Their efforts granted them a 94% coverage level certificate for 2 year olds. Robert Colón, Area 5 Manager presented the Certificate of Achievement to Samantha Lustinia, Center Manager Leesburg.
Vaccines: Protect, Promote, Prevent
Event in Palm Beach County

On March 13, 2014, the Palm Beach County Childhood and Adult Immunization Coalition sponsored its annual vaccine update program at Bethesda Hospital East in Boynton Beach. The program was entitled Vaccines: Protect, Promote, Prevent and was directed toward local health care providers and their staff, as well as FDOH employees, hospital employees, and nursing students. Several informational tables were set up at the program with representatives from the following community partners: Women-Infants-Children (WIC), Children’s Medical Services (CMS), Vaccines for Children (VFC), Perinatal Hepatitis B Case Management and Whooping Cough Prevention, Healthy Mothers-Healthy Babies, and two pharmaceutical companies. All provided educational materials regarding their respective programs and products.

Alina Alonso, MD, Director of FDOH–Palm Beach was the moderator for this program. Following Dr. Alonso’s opening remarks, Colette S. Chiacchiero, Immunization Consultant for Area 10, gave a presentation on VFC updates. Next, area VFC providers with high immunization coverage rates in two year old children were recognized with Superior Immunization Achievement Awards.

Deborah Hogan, RN, Chairperson for the Palm Beach County Childhood and Adult Immunization Coalition and Community Health Nursing Consultant for FDOH–Palm Beach gave the next presentation on epidemiology of certain vaccine preventable diseases on the national, state, and county levels.

Charles Gonik, MD, Obstetrician/Gynecologist and Senior Physician with FDOH–Palm Beach gave his presentation on the importance of vaccines in protecting women and children. The presentation focused on two important vaccines: the birth dose of the hepatitis B vaccine for all infants prior to hospital discharge and the prevention of pertussis with the Tdap vaccine for pregnant and postpartum women and their families. There have been recent updates in the recommendations for Tdap, and Dr. Gonik reviewed the latest recommendations, along with the supporting evidence.

The closing speaker was Robert Parkes, MD, Epidemiologist and Director of the Division of Epidemiology and Communicable Diseases with FDOH–Palm Beach. Dr. Parkes spoke about the importance of the second dose of varicella in children, along with the supporting research to promote this practice.

A question and answer session followed the presentations. Attendees were also able to meet the speakers and visit the informational tables prior to the conclusion of the program. The program was a big success and a great learning opportunity for everyone!
Vaccine Immunization Statements Update

Vaccine Information Statements (VISs) are produced by the CDC to explain the benefits and risk of a vaccine. Federal law requires all vaccine providers to give patients, or their parents or legal representatives, the appropriate Vaccine Information Statement whenever a vaccination is given.

VISs are available in English and many other languages at the Immunization Action Coalition website: www.immunize.org/vis/.

The latest vaccine updates include:

**Hib:** An updated VIS for Hib (*Haemophilus Influenzae* type b) available at: www.cdc.gov/vaccines/hcp/vis/vis-statements/hib.html. The new Hib edition allows CDC to finally retire the elder statesman of VISs (Hib was last published in 1998). The VIS contains a change in the adverse events section (“problems that can happen after any vaccine”). It is advisable to begin using the updated VISs immediately.

**Tetanus diphtheria (Td):** An updated VIS for Td is available at: www.cdc.gov/vaccines/hcp/vis/vis-statements/td.html. The Td VIS replaces the older Td/Tdap VIS. The VIS contains a change in the adverse events section (“problems that can happen after any vaccine”). It is advisable to begin using the updated VISs immediately.

**Rotavirus:** An updated rotavirus VIS available at: www.cdc.gov/vaccines/hcp/vis/vis-statements/rotavirus.html. The most significant change is in the estimated rates of intussusception following vaccination.

The Pediatric Multi-Vaccine VIS is temporarily removed from service for updating to reflect current ACIP recommendations. An updated edition should be available by mid-2014. Do not use the 11/16/12 edition of the Multi-Vaccine VIS. Use the individual VISs when DTaP, Hib, Hepatitis B, Polio, PCV13, and/or Rotavirus vaccines are administered.

Check your stock of VISs against the list provided below to ensure you have the most up-to-date VIS information.

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>MMR</td>
<td>4/20/2012</td>
</tr>
<tr>
<td>MMRV</td>
<td>5/21/2010</td>
</tr>
<tr>
<td>MCV/MPSV</td>
<td>10/14/2011</td>
</tr>
<tr>
<td>Multi-vaccine</td>
<td>11/16/2012</td>
</tr>
<tr>
<td>PCV13</td>
<td>2/27/2013</td>
</tr>
<tr>
<td>PPSV</td>
<td>10/6/2009</td>
</tr>
<tr>
<td>Polio</td>
<td>11/8/2011</td>
</tr>
<tr>
<td>Rabies</td>
<td>10/6/2009</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>8/26/2013</td>
</tr>
<tr>
<td>Shingles</td>
<td>10/6/2009</td>
</tr>
<tr>
<td>Td</td>
<td>2/4/2014</td>
</tr>
<tr>
<td>Tdap</td>
<td>5/9/2013</td>
</tr>
<tr>
<td>Typhoid</td>
<td>5/29/2012</td>
</tr>
<tr>
<td>Yellow fever</td>
<td>3/30/2011</td>
</tr>
</tbody>
</table>

Source: Immunization Action Coalition website at: www.immunize.org/.

---

**I Want Health Insurance for My Child. Who Do I Call?**

Florida KidCare is the state health insurance program for uninsured children under age 19. It includes 4 different programs: MediKids, Healthy Kids, Children’s Medical Services, and Medicaid. When you apply for the insurance, Florida KidCare will check which program your child may be eligible for based on age and family income.

To apply for Florida KidCare, call 1-888-540-5437, apply online, or print an application and instructions. For more information, visit www.floridakidcare.org.

---

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/prevention-safety-and-wellness/immunization/mailing-list.html.
These vaccination publications, and many more, are available as Adobe Acrobat PDFs as a download on the Immunization Section website. Visit our publications page at: [www.floridahealth.gov/prevention-safety-and-wellness/immunization/publications/index.html](http://www.floridahealth.gov/prevention-safety-and-wellness/immunization/publications/index.html). Check back often as we will be adding to our publications gallery.

Many Immunization Section materials are designed for customizing to display your logo, company name, address, email, web address, and phone number. We grant immunization partners rights to display their logo, provided that no parts of the Immunizations Section’s or the FDOH’s materials, logos, or brand are altered in any fashion. In addition, the Section’s products may not be sold. If you are interested in commercial printing of these documents, please contact Jennifer Ouzts at 850-245-4444, extension 2382, or by email at [jennifer.ouzts@FLHealth.gov](mailto:jennifer.ouzts@FLHealth.gov), to request print-ready PDFs.

---

**2014-15 SCHOOL ENTRY IMMUNIZATION REQUIREMENTS**