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MESSAGE FROM THE SECTION ADMINISTRATOR

CHARLES H. ALEXANDER

Welcome to the Winter edition of IMMU-NEWS.

Winter is finally here! Our infamous Florida winter weather gives us plenty of variety; some very chilly days and some warm days too. These shifts in weather can also lend to coughs, cold, and the flu. Don't forget to get your flu shot this season—It's not too late! Flu season is in full swing and what better way to protect your friends and family than with immunization. In this issue you will learn about pertussis, cervical cancer, HPV, and the importance of teen vaccinations.

The Immunization Section has had several program staff changes of note since the last issue.

Two CDC Public Health Advisors, Bobbie Strickland and Halima Dumas, have moved on to other positions within the CDC after two years of service with the Immunization Section. We wish them both much success in their new career ventures. We thank both ladies for their outstanding service.

The Immunization Section welcomes four new staff members. Janet Compton joined the Clinical/Quality Improvement Unit as a Government Operations Consultant II. Robert Glenn joined the Field Operations team as an Operations and Management Consultant II. Lastly, we welcome two new members to the Florida SHOTS team; Ryan Richbourg is a Tester and Larry McIntyre is a Training Consultant. We welcome each new team member and look forward to working with them.



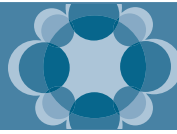
We also wish Susan Lincicome a happy retirement after 23 years of service to the Immunization Section. Susan was instrumental in the development and functionality of Florida SHOTS.

Charles H. Alexander

We wish everyone a warm and healthy winter. Stay safe, enjoy the cooler weather, and do not forget to get your flu shot.

Enjoy this issue and visit us at ImmunizeFlorida.org!





Division of Disease Control and Health Protection Employee Recognition Program

The Division of Disease Control and Health Protection began an employee recognition program in February 2013. Any staff person in the division is allowed to nominate any coworker for the recognition, excluding project specific contract staff. Recognition categories include: Shining Star Award (employee of the month), Constellation Award (team of the quarter), Superstar of the Year (a staff person that has been an employee of the month in the last 12 months), Shooting Star Award (given to a person outside of the division), Galaxy Award (given to a team outside of the division), and the Star Recognition (an informal recognition). The Employee Recognition Committee reviews the nominations and ranks the nominees. All winners receive a certificate of appreciation, announcement in the Division Director's weekly newsletter, and their picture and write-up posted in a Division common area. As mentioned in the fall 2013 newsletter, the Florida SHOTS Helpdesk team won the Constellation Award for the 2nd quarter of 2013. Another Immunization Section team member was nominated for the 4th quarter of 2013. Cristina Dusek, from the Immunization Section and Jim Matthias, from the Bureau of Epidemiology, were nominated for the Constellation award for their work on a pertussis outbreak at a religious affiliated school in Columbia County. Cristina and Jim provided on-site assistance for outbreak control and disease surveillance by conducting interviews with parents and staff of the school, educating local medical providers on pertussis, and facilitating case identification, treatment and prophylaxis for high-risk individuals.

Perinatal Pertussis Prevention Strategies

In the face of dramatic and persistent increases in pertussis (whooping cough) cases throughout the United States, the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) has updated its guidelines for the use of the tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine (Tdap) for pregnant and postpartum women

and their families. Calendar year 2012 had the highest number of reported pertussis cases in any one year in the U.S. since 1955. Country-wide, there were 41,000 reported cases and 18 deaths, mostly in children less than one year old. Infants younger than 3 months of age are at a very high-risk for severe infection until they begin their own vaccine series with DTaP at 2 months of age. Clearly, there is a need for more aggressive strategies to protect our vulnerable infant population.

One proven strategy for preventing pertussis is known as "cocooning." This strategy consists of vaccinating the woman, their partner, and other close contacts, such as grandparents and caregivers. Cocooning is a way to protect babies from catching pertussis from the people around them. Once these individuals are vaccinated, they are less likely to spread pertussis to the baby by surrounding the baby with a "cocoon" of protection. When a woman initially presents to her obstetrician or clinic for prenatal care, this is an excellent time to begin counseling about the importance of receiving the Tdap vaccine during the last trimester of pregnancy and discuss "cocooning" strategies for the woman and her family.



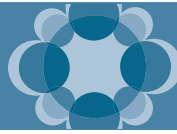
The updated guidelines now recommend that women receive the Tdap vaccine during the third trimester of each pregnancy. Health care personnel should administer a dose of Tdap during each pregnancy irrespective of the woman's prior history of receiving Tdap. If Tdap is not administered during pregnancy, then it should be administered in the immediate postpartum period.

Why give Tdap during pregnancy? Several studies provide evidence supporting the existence of efficient transplacental transfer of pertussis antibodies during pregnancy. In other words, this allows the mother to build an immune response and transfer

continued next page

Standard Abbreviations in This Issue

- ACIP: Advisory Committee on Immunization Practices
- CDC: Centers for Disease Control and Prevention
- CHD: County Health Department
- FDOH: Florida Department of Health
- DTaP: Diphtheria-Tetanus-Pertussis vaccine
- Florida SHOTS™: Florida State Health Online Tracking System
- HBIG: Hepatitis B Immune Globulin
- Hep B: Hepatitis B
- Hib: *Haemophilus influenzae* B
- HPV: Human Papillomavirus
- MCV: Meningococcal Conjugate Vaccine
- MMWR: Morbidity and Mortality Weekly Report
- TB: Tuberculosis
- Tdap: Tetanus-diphtheris-pertussis
- VFC: Vaccines For Children



it to her infant. This likely affords protection to the infant until they are old enough to begin the primary DTaP series. Some women express concerns about receiving vaccines while they are pregnant. In 2011, ACIP reviewed the Vaccine Adverse Event Reporting System's safety data report on the use of Tdap in pregnant women. The reports showed no unusual or unexpected patterns of adverse events, and there has been no evidence that the vaccine causes harm to the fetus.

Why is receiving Tdap during pregnancy more beneficial than receiving Tdap during the postpartum period?

If the mother delays receiving the Tdap vaccine until after the baby is born, the infant would be without this added protection during his or her first 2 weeks of life since it typically takes 1-2 weeks for her antibody levels to peak.



Why give Tdap during each pregnancy?

Tdap given at one pregnancy may not provide sufficient protection for subsequent pregnancies due to waning immunity in some people. Currently, pregnant women are the only adults who should receive more than one "booster" dose of Tdap.

The Immunization Section is currently conducting medical record reviews in the larger maternity

hospitals across the state to review perinatal hepatitis B screening and testing protocols, follow-up hepatitis B and HBIG administration in perinatally (hepatitis B) exposed infants, administration of the birth dose of the hepatitis B vaccine, and administration of the Tdap vaccine to pregnant and postpartum women. After the record reviews are conducted, recommendations are presented to help improve the hospital's compliance with the best practices established by the ACIP.

Since the updated Tdap guidelines were released in 2013, some maternity hospitals and prenatal care providers are "lagging" behind in their protocols to comply with the latest recommendations. During the follow-up meetings to these medical record reviews, the new recommendations and protocols are reviewed with the hospital's directors and staff. Educational materials and technical assistance are offered to assist the hospital in adopting the new recommendations. Discussions with the hospital staff also reveals the barriers they face in implementing recommendations.

Many private prenatal care providers do not offer Tdap to their pregnant clients due to insurance and cost issues. However, the cocooning strategy should still be discussed with the pregnant woman so that she has the option to receive the Tdap vaccine from another source, such as the local county health department. In some cases where the woman is uninsured or underinsured and between

the ages of 19 and 26 years of age, the woman may have the option to receive Tdap at no cost or at a very nominal cost through the CHD Program for Expanded Eligibility for Adult Vaccines.

The majority of hospitals have implemented standing orders for women to receive Tdap during the postpartum period and prior to discharge from the hospital. In many cases, these orders are "opt in" standing orders, meaning the doctor must remember to check off this order if he or she wants their patient to receive the Tdap vaccine. Sometimes the physician forgets to check off the order, and the woman doesn't receive Tdap. In other cases, the reason for vaccine refusal is included on the consent form, it may identify a reason, such as "received Tdap with pregnancy last year" or "received tetanus shot two years ago." These are no longer a legitimate reason for refusal. If a woman is queried as to her reason for refusal, the hospital staff has the opportunity to educate the client regarding the updated recommendations.

Many hospitals have become proactive in their efforts to prevent pertussis in their facilities by offering employees the Tdap vaccine. Those offering Tdap to their employees are usually targeting specific groups of employees, mainly those in women's and children's services, respiratory, imaging services, and the emergency department. Some hospitals will offer Tdap to all employees and charge a fee to employees outside of the targeted groups. Employee Health practitioners can counsel employees about Tdap during encounters where they are offering other services such as the annual flu vaccine, employee exposures, or TB tests.

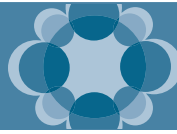
Pertussis prevention during the perinatal period is a collaborative effort among prenatal care providers, county health departments, and hospitals. Each entity has the opportunity to educate, counsel, and protect our clients from pertussis and its potentially devastating outcomes.

See CDC recommendations at: www.cdc.gov/mmwr/preview/mmwrhtml/mm6207a4.htm.

ACIP Recommended Immunization Schedules

We are pleased to share the February 3, 2014/63 (Early Release) of the CDC MMWR publication regarding the ACIP recommended Recommended Immunization Schedules for *Persons Aged 0 Through 18 Years* — United States, 2014 and ACIP Recommended Immunization Schedule for *Adults Aged 19 Years or Older* — United States, 2014.

Each year, recommendations for routine use of vaccines in children, adolescents, and adults in the United States are developed by the ACIP. We recommend that all healthcare providers visit www.cdc.gov/mmwr/ to read the article for important details and changes to last year's schedules.



MenHibrix Vaccination

On June 14, 2012, the Food and Drug Administration licensed Hib-MenCY-TT [MenHibrix, GlaxoSmithKline Biologicals] for the prevention of invasive Hib and serogroups C and Y meningococcal disease in children aged 6 weeks through 18 months.

At its October 2012 meeting, the ACIP voted to recommend vaccination against meningococcal serogroups C and Y for children aged 6 weeks through 18 months at increased risk for meningococcal disease. MenHibrix is licensed for active immunization for prevention of invasive disease caused by Hib and meningococcal serogroups C and Y. MenHibrix is not indicated for prevention of disease caused by meningococcal serogroup B, the most common serogroup causing disease in infants, or serogroups W-135 or A, which are represented in quadrivalent meningococcal vaccines.



Based on an assessment of the potential public health impact, including the current low incidence of meningococcal disease in the United States, ACIP does not currently recommend routine meningococcal vaccination for infants who are not at increased risk for meningococcal disease.

High-risk infants include those with persistent complement pathway deficiencies, anatomic or functional asplenia (including sickle cell disease), or those who are in communities with serogroup C and Y meningococcal disease outbreaks.

CDC recommendations include:

Use in high-risk infants aged 2-18 months for the prevention of meningitis infection caused by *Neisseria meningitidis* serogroups C and Y and *Haemophilus influenzae* type b.

- 4-dose regimen (not for routine vaccination)
- 0.5 mL IM at 2, 4, 6, and 12-15 months
- May be initiated as early as 6 weeks old; last dose may be given as late as 18 months old

MenHibrix is safe and immunogenic against Hib and *N. meningitidis* serogroups C and Y. Four doses of MenHibrix fulfill the primary series and booster dose Hib immunization recommendations. If MenHibrix vaccine is used to achieve protection against serogroups C and Y, MenHibrix should be used for all 4 doses of Hib vaccine. Because the protection offered by meningococcal vaccines wanes over time, an infant series will unlikely provide protection against meningococcal disease until

age 11–12 years, the age of recommended adolescent vaccination. Infants and children who received MenHibrix and are travelling to areas with high endemic rates of meningococcal disease such as the “meningitis belt” are not protected against serogroups A and W-135 and should receive a quadrivalent meningococcal conjugate vaccine licensed for children aged ≥ 9 months before travel.

You can find more information on MenHibrix including contraindications, warnings and precautions, by visiting the sites below:

U.S. Food and Drug Administration MenHibrix Product Approval: www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm308566.htm

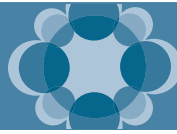
MenHibrix vaccine package insert: www.fda.gov/downloads/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM308577.pdf

For full CDC recommendations, visit: www.cdc.gov/mmwr/preview/mmwrhtml/rr6202a1.htm?s_cid=rr6202a1_w

FDOH in Lake County Presented Certificate of Achievement

At a recent Immunization Coalition meeting in December 2013, Robert Colón presented Certificates of Achievement for Coverage Levels to FDOH in Lake County. The Immunization staff has worked very hard and been very diligent for many years to make immunizations a stand out department at FDOH in Lake County. Robert Colón, Area 5 Manager presented the Certificate of Achievement to Virginia L. Penley-Foley, Senior Nursing-Clerk, FDOH in Lake County.





Do You Have a Preteen or Teen? Protect Them Against Serious Diseases!

Leaving their lunch at home, forgetting to get a permission slip signed, suddenly needing a ride somewhere after school... you knew there would be days like this. But did you know that as they get older, girls and boys are at increased risk for some infections. Also, the protection provided by some childhood vaccines begins to wear off. Immunizations can help protect your children, as well as their friends, community, and other family members around them like babies or grandparents.

There are four vaccines recommended for preteens and teens. All children should get a flu vaccine every year, and the three other vaccines should be given starting when children are 11 to 12 years old. If you have an older child like a teen, it's not too late to get shots they've missed. Your teen may also need a booster of a vaccine

that needs more than one dose. You can take the opportunity to discuss recommended vaccines during any encounters you have with your child's doctor, nurse, pharmacy, or clinic.

Tdap vaccine, which is a booster against tetanus, diphtheria, and pertussis. Pertussis, or whooping cough, can keep

children out of school and activities for weeks. It can also be spread to babies, which can be very dangerous.

Meningococcal vaccine, which protects against meningococcal disease. Meningococcal disease is caused by bacteria and is a leading cause of bacterial meningitis (a serious infection around the brain and spinal cord) and its complications.

HPV vaccine, which protects girls and women against the types of HPV that most commonly cause cervical cancer. HPV vaccine can also help protect boys against genital warts and anal cancer.

Influenza (flu) vaccine, because even healthy children can get the flu, and it can be serious. All children, including your preteens and teens, should get the flu vaccine every year.



For families with health insurance, all or most of the cost of vaccines is usually covered. For families without insurance, children age 18 and younger may be eligible to get the vaccines at low or no cost through the VFC Program. You can find out more about the VFC Program, or about vaccines for preteens and teens, by visiting www.cdc.gov/vaccines/teens or by calling 1-800-CDC-INFO.

Speak with your doctor, nurse or clinic, and learn more about these important vaccines to protect your children. Since preteens and teens are looking to you—not just to bring them the lunch they forgot, or to give them the ride they need—but also to help protect their health.

Adapted from CDC.

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.



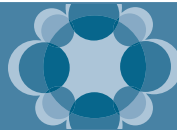
National Infant Immunization Week

**IMMUNIZATION.
POWER TO PROTECT.**

NIIW



April 26–May 3



HPV Vaccines Offer Disease Protection Pre-Teens Can Grow Into—Now For Girls And Boys

When it comes to their children, parents are always planning... healthy dinners... safe activities. One simple strategy can reap tremendous benefits. This strategy is to have your preteens vaccinated against HPV—the leading cause of cervical and anal cancers, and potentially save a life. In both women and men, HPV can cause anal cancer and cancer of the mouth/throat (oropharyngeal cancer). It can also cause cancers of the cervix, vulva, and vagina in women, and cancer of the penis in men.

“There are about 12,000 new cervical cancer cases each year in the United States,” said Dr. Melinda Wharton, deputy director of the National Center for Immunization and Respiratory Diseases at the Centers for Disease Control and Prevention (CDC). “Cervical cancer causes about 4,000 deaths in U.S. women



each year. But vaccinating boys and girls against HPV greatly reduces the chances that today’s girls will ever have to face this devastating disease.”

CDC recommends HPV vaccination for 11- and 12-year-old girls and boys, as well as for young women ages 13 through 26 and young men ages 13 through 21 who have not yet been vaccinated.

Two HPV vaccines—Cervarix and Gardasil—are available for girls to protect against the HPV types that cause most cervical and anal cancers. Gardasil also protects against the HPV types that cause most genital warts. Gardasil is the only vaccine approved for boys.

Both brands of HPV vaccine are given in three doses (shots) over six months, and protection requires all three doses. “Completing the three-dose HPV vaccine series is very important to ensure protection against HPV-related disease,” Dr. Wharton said.

While vaccinating against a sexually transmitted virus at age 11 or 12 might seem unnecessary, the preteen years are the best time to vaccinate. “The HPV vaccine only provides protection if it is given before exposure to HPV,” said Dr. Wharton. “Someone can be infected with HPV the very first time they have sexual contact with another person.” To receive the most benefit from the HPV vaccination, all three doses must be given prior to the beginning of sexual contact with another person. Atlanta mom Amber Zirkle recognizes the importance of vaccinating her children now for protection they’ll need in the future. Her 11-year-old daughter will get an HPV vaccine this year at her regular check-up. As for getting HPV

vaccine for her 16-year-old son, Amber said, “I didn’t know it was available for boys. I’ll talk with the pediatrician about it.” She added, “Genital warts aren’t something I want my son to deal with.”

Other vaccines recommended specifically for pre-teens include meningococcal conjugate, which protects against bacterial meningitis, and Tdap, which boosts immunity against pertussis (whooping cough). Everyone age six months and older should get an annual flu vaccine.

To learn more, visit www.cdc.gov/vaccines/teens/ or call 1-800-CDC-INFO.

Adapted from CDC.

VFC Program Annual Reenrollment

The VFC Program has begun the annual reenrollment push. As required by the CDC, providers must submit an updated reenrollment form each year.

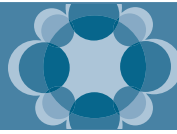
As in past years, the VFC Program has scheduled providers to submit the reenrollment in waves. Providers are notified through blast fax and have 60 days from the first notice to submit the completed reenrollment form. If a form is not sent in to the VFC Program or it is still missing required information after 60 days, there may be an interruption in your vaccine shipments. The VFC Program makes every effort to notify providers when there is missing information on the form. Staff send out notices 30 days and 15 days prior to the deadline so that providers can continue to receive vaccine without delay.

The CDC has added a new requirement for 2014 requiring providers to complete annual training covering the VFC Program and vaccine storage and handling. Upon completion of the courses, a certificate of completion can be saved. Please do not submit these certificates to the VFC Program at this time, but keep them available upon request by the VFC Program or your Immunization Section Field Staff.

For questions about the reenrollment form, process, or training, please contact your VFC Program representative at 1-800-483-2543, option 6, then select your county or visit our website at:

<http://www.floridahealth.gov/prevention-safety-and-wellness/immunization/vaccines-for-children/reenrollment1.html>





Prevent Cervical Cancer Now

If there were a vaccine to prevent a cancer that kills 4,000 women each year, would you get it for your children? Libby Malphrus' personal battle against cervical cancer convinced her how important it is to protect her own daughter.

"Anyone can get cervical cancer. I was at my healthiest when I was diagnosed," said Libby, a vivacious mom and professional genetics counselor. "I was eating right, exercising, and feeling healthy—then, BOOM. I found out I had cervical cancer, even with regular Pap tests and checkups. I was not a person who expected this."

Dr. Anne Schuchat, assistant surgeon general and director, National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention (CDC), said, "We have a vaccine against cancer that is safe and effective. Please make sure your 11-12 year olds get vaccinated. No one's daughter should have to suffer from cervical cancer in the future."

Libby added, "We have this amazing opportunity to prevent cancer. As soon as my daughter turns 11, we will call the pediatrician's office to schedule her first HPV vaccination. I don't want her to ever have to experience the pain and suffering I went through—and I consider myself lucky."

Besides her personal journey with cancer, Libby lost her mother to cancer very recently, making her passionate about prevention.

"I talk to my friends and family all the time. I understand they might not understand why their sons or daughters need this vaccine at an early age. I remind them that we don't wait until they are exposed to a disease to get them their vaccines—we do it now. It's the same with the HPV vaccine—let's get that protection on board before they are ever making decisions about dating, marriage, or having a family.

If you haven't gotten your child the HPV vaccine yet, or haven't complete the three-dose series, call your child's doctor or nurse today. If you have an older teen who isn't yet vaccinated, it's not too late.

Visit the CDC website to find out more about HPV vaccine: www.cdc.gov/vaccines/teens.

“Vaccines are the tugboats of preventive medicine.”

-- William Foege MD, MPH

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.

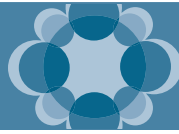
To apply for Florida KidCare, call 1-888-540-5437, apply online, or print an application and instructions. For more information, visit www.floridakidcare.org.

Fl  rida KidCare



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: <http://www.floridahealth.gov/prevention-safety-and-wellness/immunization/mailling-list.html>.





TEEN VACCINATIONS

These Teen Vaccination publications, and many more, are available as Adobe Acrobat PDFs.

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 DOH'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.ouzs@FLHealth.gov, to request print-ready PDFs.

Think Your Teen Is Social?

So Are Vaccine-Preventable Diseases.

We all know the importance of immunizations for babies and toddlers, however immunizations during the teen years are equally important. As your teen's social world grows, so does his or her risk for exposure to vaccine-preventable diseases like meningitis, whooping cough (pertussis), and HPV.

Teens commonly encounter these vaccine-preventable diseases that are quickly spread through social interaction with their peers. Due to the highly contagious nature of these diseases, many schools and colleges require strict vaccination before admission.

Cost is not a barrier to vaccination. Children ages 18 and younger who don't have insurance or whose insurance doesn't cover vaccines are eligible to receive free vaccinations through participating vaccine providers for Children providers or the county health department.

Keep your child on a healthy track. Vaccinate today.

Vaccines for Teens 11-18:

- Meningitis
- HPV
- Pertussis
- Tetanus
- Whooping cough
- MMR2
- MMR1
- Polio
- Hepatitis B
- Hepatitis A
- Hib
- Meningococcal

Immunization Section: 850-245-4342 / www.immunizeflorida.com | Vaccines for Children Program: 800-483-2543
www.immunizeflorida.com/VFC | Florida SHOTS: 877-888-7468 | www.Behav.com

Talk to Teens About Vaccines!

Informed Discussions Are Invaluable.

Practical discussions to present the facts about vaccination are valuable to both parents and teens.

When talking to teens:

- Be honest.
- Share the same information you would with a parent.
- Keep the conversation comfortable.
- Present the facts.

When talking to parents:

- Start early. Inform parents of vaccinations coming up at their next visit/child visit, even if it's a year in advance.
- Explain the Vaccine Information Statement.
- Address parents' concerns about vaccine safety with a clear understanding of the risks associated with not vaccinating.
- Explain vaccines that are new or never used.
- Present the benefits of the vaccine, disease prevented, risk involved, vaccine safety and administration of each vaccine.

Establish an open line of communication with parents and teens as the first step to vaccinating your adolescent patients.

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Dead in a Day.

Is It the Common Cold? Or Something Deadly?

Meningitis can turn from mild symptoms to death in just one day. A highly contagious disease, meningitis can be passed through social interaction like coughing, kissing or sharing a drink and alcohol. Items frequently encounter these social settings like college dorms and schools where meningitis can spread quickly. Immediate diagnosis of meningitis is critical to preventing permanent injury and death.

By vaccinating your child, you will protect them from some of the strains of the meningitis bacteria that can result in life-threatening and life-altering long-term effects. This safe and effective vaccine can prevent the spread of meningitis to your family.

Cost is not a barrier to vaccination. Children ages 18 and younger who don't have insurance or whose insurance doesn't cover vaccines are eligible to receive free vaccinations through participating vaccine providers for Children Program providers or the county health department.

Meningitis kills. Talk to your child's healthcare provider today about the meningococcal vaccine and safeguarding your child's shot record in Florida SHOTS, the statewide, online immunization registry.

Immunization Section: 850-245-4342 / www.immunizeflorida.com | Vaccines for Children Program: 800-483-2543
www.immunizeflorida.com/VFC | Florida SHOTS: 877-888-7468 | www.Behav.com

Keep Old Diseases in the Past.

Protect Your Child. Vaccinate Yourself and Your Teen.

Vaccinations are intended to protect not only the individual, but also entire communities. As our society becomes increasingly global we need to continue to protect our children from infectious diseases like tetanus, diphtheria and pertussis (whooping cough). In recent years, lower vaccination rates have led to an increase in pertussis cases and infant deaths from whooping cough.

Most children are vaccinated for tetanus, diphtheria and pertussis, but teens and adults often do not get the booster needed to extend their immunity. Florida law requires the Tdap booster be administered to children entering, attending or transferring to the seventh grade to prevent these serious illnesses.

By vaccinating your child, you are not only protecting her or her from serious illness, you are also preventing your child from becoming a carrier. Diphtheria and pertussis are highly contagious diseases that can spread very quickly through casual social encounters, and these effects are most significant in young children and elderly populations. Your child's vaccination protects her or her as well as others in your home, community and school.

Cost is not a barrier to vaccination. Children ages 18 and younger who don't have insurance or whose insurance doesn't cover vaccines are eligible to receive free vaccinations through participating vaccine providers for Children doctors or the county health department.

Talk to your doctor today about the Tdap booster for you and your teen.

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HPV Is Out There.

Make Sure Your Teen Is Protected.

Increasingly more and more young adults are being infected with the human papillomavirus (HPV). This highly contagious virus infects 6 million new people each year in the United States. HPV is contracted through sexual contact and can be passed along even when the carrier is not exhibiting symptoms of HPV.

The virus can be serious for both men and women. Certain HPV strains can cause cervical, vaginal, and anal genital cancers and genital warts. Even if your teen is not sexually active, they should be protected. Nearly million Americans are currently infected with HPV and the number is growing every day. There is no test to determine if males are infected with HPV, and often carriers do not show symptoms, causing the spread of HPV.

The HPV vaccine is safe and effective. The vaccine is not a live vaccination, so your child will not be infected with HPV. The immunization can protect your child from serious consequences of the prevalent disease.

Cost is not a barrier to vaccination. Children ages 18 and younger who don't have insurance or whose insurance doesn't cover vaccines are eligible to receive free HPV vaccinations through participating vaccine providers for Children Program providers or the county health department.

Talk to your child's healthcare provider today about the HPV vaccine and safeguarding your child's shot record in Florida SHOTS, the statewide, online immunization registry.

Immunization Section: 850-245-4342 / www.immunizeflorida.com | Vaccines for Children Program: 800-483-2543
www.immunizeflorida.com/VFC | Florida SHOTS: 877-888-7468 | www.Behav.com

Teen Vaccines Are Important.

Don't Miss Opportunities to Vaccinate!

Teens are a unique group with unique needs. To ensure they receive the necessary vaccinations to avoid diseases that could affect the rest of their lives, discuss your teen's needs and their parents about the importance of additional vaccination.

Benefits of immunizations for teens:

- Extends the healthy start from vaccines received during infancy, toddler and childhood years
- Protects against highly contagious diseases encountered in social situations
- Prevents serious illnesses with long-term effects
- Meets school and college requirements
- Creates a healthier society through high immunization rates

Immunize your teen on campus via student health checkups before parents and parents of scheduled vaccines bear their responsibility to they are required when they arrive at your office.

All adolescents should receive vaccinations for:

- Human papillomavirus
- Meningitis
- Seasonal influenza
- Tetanus/diphtheria/pertussis (one dose at place of care, scheduled return diphtheria, tetanus) with tetanus: Adjuvanted (every 10 years thereafter)

If not already received, adolescents need vaccinations for:

- Hepatitis B
- Meningitis meningococcal
- Polio
- Tetanus (Tdap/Boost)
- Shingles

Certain high-risk adolescents need vaccination for:

- Pneumococcal disease

Florida Vaccines for Children Program, the government-subsidized vaccine program, provides vaccinations for patients 18 years of age or younger at no cost to the patient or provider.

Florida Vaccines for Children Program benefits providers and patients:

- Eliminates cost to a patient for vaccinations
- Allows the administration of vaccines by primary care physician or other direct care public clinic
- Ensures continuity of care between patient and healthcare provider
- Does not impact provider regularly scheduled vaccine purchases
- Provides vaccinations for uninsured or underinsured children

Get your teen patients up-to-date with all their vaccines, and then safeguard those records in Florida SHOTS, Florida's free online immunization registry.

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