Maine Center for Disease Control and Prevention An Office of the

Department of Health and Human Services

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Glycol Probe Location of Data Loggers

As of January 15th, 2015 it will be a requirement of the Federal CDC that the glycol probes attached to your data loggers be placed in the central area of your storage units. This is important because the data loggers will provide a more accurate reading of actual vaccine vial temperatures when placed in the same area where the vaccine is stored.





Certificate of Calibration for Data Loggers

All VFC providers must have a current certificate of calibration for their primary data logger issued either by an ILAC-accredited laboratory or, if not ILAC-accredited, certificate must contain measurement results and a statement indicating that it meets ISO 17025 standards. All certificates must contain: name of device (optional); model number; serial number; date of calibration; and measurement results which indicate unit passed test and the documented uncertainty is within suitable limits (recommended uncertainty = +/-1F (0.5C).

State-Supplied Influenza Vaccine Guidance

There is still time to vaccinate patients in order to effectively protect them from influenza. Patients will benefit from the full protection of the vaccine 7-10 days after it is administered. We recommend that you continue vaccinating to protect against influenza this year.

To ensure that vaccine is available for all Maine people who are seeking it, please use the following as guidelines:

Health Care Providers **should** use state-supplied vaccine for patients in the following circumstances:

- The patient is a child ages 6 months through 18 years;
- The patient is pregnant or the partner of a pregnant patient;
- The patient's insurance does not cover vaccinations;
- The patient is uninsured.

Health Care Providers may use state-supplied vaccine for other patients only if:

- The Health Care Provider has already vaccinated all eligible patients listed above and has excess state-supplied vaccine; and
- Privately purchased vaccine is not available.

Please remember that providers may not charge for state-supplied vaccine. It is reasonable and allowable to charge an administration fee for administration of state-supplied vaccine in some circumstances provided that:

- MaineCare-eligible children are not charged an out of pocket administration fee;
- Administration fees do not exceed the regional Medicare maximum; and
- No one is denied vaccine because of their inability to pay an administration fee.

Tdap and Td Guidance

With an increase of phone calls to the Maine Immunization Program regarding topics around Tdap and Td, we have highlighted the two most frequent ones below.

Tdap for Pregnant women: In October 2012, the Advisory Committee on Immunization Practices (ACIP) voted to recommend that healthcare personnel should administer a dose of Tdap during <u>every</u> pregnancy irrespective of the patient's prior history of receiving Tdap (or Td). To maximize the maternal antibody response and passive antibody transfer to the infant, optimal timing for Tdap administration is between 27 and 36 weeks gestation. This recommendation is supported by the <u>American College of Obstetricians and Gynecologists (ACOG)</u> and the <u>American College of Nurse-Midwives</u>.

Catch—up vaccination with Td and Tdap for children and adolescents aged 7-18 years :

Children Aged 7 Through 10 Years

- Those not fully vaccinated against pertussis* and for whom no contraindication to pertussis vaccine exists should receive a single dose of Tdap.
- Those never vaccinated against tetanus, diphtheria, or pertussis or who have unknown vaccination status should receive a series of three vaccinations containing tetanus and diphtheria toxoids. The first of these three doses should be Tdap.

*Fully vaccinated is defined as 5 doses of DTaP or 4 doses of DTaP if the fourth dose was administered on or after the fourth birthday.

http://www.cdc.gov/mmwr/pdf/wk/mm6001.pdf

• Persons aged 11 through 18 years who have not received Tdap vaccine should receive a dose followed by tetanus and diphtheria toxoids (Td) booster doses every 10 years thereafter.

• Inadvertent doses of DTaP vaccine:

-- If administered inadvertently to a child aged 7 through 10 years may count as part of the catch-up series. This dose may count as the adolescent Tdap dose, or the child can later receive a Tdap booster dose at age 11 through 12 years.

-- If administered inadvertently to an adolescent aged 11 through 18 years, the dose should be counted as the adolescent Tdap booster.

http://www.cdc.gov/vaccines/schedules/downloads/child/catchup-schedule-pr.pdf



If you have any questions, please contact the Maine Immunization Program at: Phone (207) 287-3746 or (800) 867-4775