



MDPH Immunization Program Newsletter

Fall-Winter 2016-2017

Pharmaceutical Grade Refrigerator Secondary Unit Requirement 2018

New for 2018!

MDPH will require the use of pharmaceutical grade refrigerators for all refrigerator storage units (primary and secondary). A secondary storage unit is defined as storing smaller amounts of vaccine than your primary storage unit, usually located in exam rooms or departments throughout the facility. Typically, pharmaceutical grade refrigerators have a narrow operating range (less than 2 Celsius degrees or 3 Fahrenheit degrees).

Characteristics of pharmaceutical grade refrigerators include:

- Internal overhead fans to disperse cold air throughout the unit, eliminating cold pockets of air
- Adjustable wire shelves to allow better air flow
- No storage bins, or shelves on door
- Micro Processor Temperature Controller

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HPV 2 Dose Recommendation

The Advisory Committee on Immunization Practices (ACIP) and the Centers for Disease Control and Prevention (CDC) have updated their recommendations for HPV vaccine stating that only 2 doses of HPV vaccine are needed for adolescents who begin the vaccination series before their 15th birthday. They were published in the [MMWR](#) on December 16, 2016.

This new 2-dose recommendation provides an opportunity to achieve protection against vaccine-preventable HPV-related cancers with just 2 office visits. MDPH

and CDC recommend that providers implement the new recommendations immediately.

ACIP and CDC revised their recommendations for HPV vaccination after a thorough review of studies during several ACIP meetings. Data from clinical trials showed that boys and girls aged 9 through 14 years who received 2 doses of 9vHPV vaccine (0, 6-12 month schedule) produced immune responses that were significantly higher for all 9vHPV types compared to females

aged 16-26 years who received 3 doses (0, 1-2, 6 month schedule). Additional studies found similar results for 4vHPV and 2vHPV vaccines

A person's HPV vaccine schedule is now determined by their age when they begin the series, and whether or not they have certain immunocompromising conditions.

Please see the [CDC Clinician FAQ](#) on the HPV 2 Dose Schedule for more information: <https://www.cdc.gov/hpv/downloads/hcvg15-ptt-hpv-2dose.pdf>

Mumps Outbreak 2016

An outbreak of mumps occurred during 2016 in Massachusetts, primarily among vaccinated college students. This was the largest mumps outbreak in over 30 years in Massachusetts. The outbreak coincided with a large national outbreak of mumps, in which 46 states reported more than 5000 cases (CDC, data are preliminary and subject to change). Eight states, including Massachusetts, reported more than 100 cases.

MDPH and local public health partners, particularly Cambridge Health

Alliance and the Boston Public Health Commission, investigated almost eight hundred suspect cases from January – December 2016.

The 2016 mumps outbreak was the largest mumps outbreak in over 30 years in Massachusetts.

Of the approximately 250 confirmed and probable cases of mumps, approximately 85% were linked to colleges and universities in

the Boston area. The majority of cases had documentation of two doses of MMR vaccine. Mumps outbreaks tend to happen when people have repeated, prolonged close contact, such as in dormitories and at parties. Boston area colleges and universities responded to this outbreak using creative means and resources for isolating suspected cases of mumps, and discouraging saliva-sharing activities which can spread mumps.

Important things to remember:

- Two doses of MMR are 88% effective (at best) in preventing mumps.
- Early recognition of suspect cases, prompt testing, and isolation of ill patient for five days after onset of parotitis is key to stopping spread.
- Call MDPH at 617-983-6800 if you have questions or concerns about mumps, or to report a suspected case.
- Vaccinated healthcare providers can develop mumps following an exposure. Using standard infection control measures when seeing patients reduces risk.
- Vaccinated people appear to have less severe illness than an unvaccinated people.

Pentacel Supply

Sanofi Pasteur's Pentacel (DTaP-IPV/Hib) vaccine is now available for all 4 doses in the primary series. The MDPH is now able to supply enough

Pentacel vaccine for providers to administer 4 doses in the DTaP, IPV, and Hib series. Providers currently using Pediarix (DTaP-IPV-Hep B) who wish to continue to use this combination

vaccine in the future should feel free to do so. Now that the shortage is over, MDPH recommends that providers stock either Pentacel or

Pediarix, not both, vaccines as a best practice to reduce the risk of medical errors. If you have any questions on vaccine ordering, please contact the Vaccine Unit at 617-983-6828.

Flu Doses Still Available

Flu activity is increasing in Massachusetts—remember that the flu vaccine offers the best protection against this potentially serious disease!

To All Pediatric Providers: MDPH has plenty of 2016-17 flu vaccine doses in inventory at McKesson.

If your practice needs additional doses of flu vaccine for your patients under 19 years of age, please place your flu vaccine order in the MIIS through the 'New Flu Order' module.

Please call the Vaccine Unit

with any questions at 617-983-6828.

Remind parents that while seasonal [flu activity varies](https://gis.cdc.gov/grasp/fluview/main.html) (<https://gis.cdc.gov/grasp/fluview/main.html>),

flu activity usually peaks between December and February, though activity can last as late as May. Here in New England, most flu seasons don't peak until

February or even mid-March, so there's plenty of reason to get a flu shot if they haven't done so already. Remember that an annual flu vaccine is the best way to protect against this potentially serious disease. Each year, millions of children get sick with seasonal influenza; thousands of children are hospitalized and some children die from flu.

AFIX HPV Grant

The MDPH Immunization Program received a two year CDC grant to work on a project entitled “Increasing HPV Vaccine Coverage by Strengthening Adolescent AFIX Activities.” Assessment, Feedback, Incentives and eXchange (AFIX), is a continuous quality improvement process focused on implementing practices to increase immunization coverage levels and decrease missed vaccination opportunities at the

provider level. Since 1993, MDPH has been conducting AFIX quality reviews. MDPH has been using the Massachusetts Immunization Information System (MIIS) since 2014 to provide immunization coverage rates to individual practices for their 2 year old and 13-18 year old patients. During an AFIX Quality Review, staff from MDPH work with each practice to formulate a quality improvement plan to increase coverage levels at

their site by improving immunization practices and services. The new grant will enhance AFIX activities in several ways, such as using local physician experts to provide physician to physician education to increase provider-level participation and impact from AFIX.

MDPH encourages providers to participate in AFIX and learn valuable ways to increase their HPV vaccination rates. For more information on AFIX, please contact the MDPH Assessment Unit at immassessmentunit@state.ma.us or at (617) 983-4330.



Predrawing Vaccines

Filling a syringe before it is needed increases the risk for administration errors.

The Vaccine Unit has noticed an increased number of reports of practices having to discard vaccine at the end of the day because vaccines were predrawn and not used.

MDPH follows the CDC's recommendations on predrawing vaccines. CDC recommends that providers draw up vaccine only at the time of administration and not predraw vaccines. Filling a syringe before it is needed in-

creases the risk for administration errors. Once in the syringe, vaccines are difficult to tell apart. Other problems associated with this practice are wasted vaccine, the risk of inappropriate temperature conditions, resulting in potentially reduced vaccine potency, and possible bacterial contamination in vaccines that do not contain a preservative, such as single-dose vials.

If a predrawn vaccine is not immediately administered, the syringe should be appropriately labeled, refrigerated, and discarded at the end of the clinic day or shift. Please ensure you are discussing with parents what immunizations you plan to give during their child's visit before drawing up the vaccine. This strategy should help decrease the number of vaccines drawn up but not administered.

Bi-Directional Data Exchange Now Available for the MIIS

On January 23 2017, a new version of the Massachusetts Immunization Information System (MIIS) was released. The major functionality associated with this release includes an inventory deduction tool, data quality dashboard, and HL7 query and response (otherwise known as bi-directional data exchange). Bi-directional data exchange enables providers that use electronic

health records to not only submit data from their EHR to the MIIS, but to also query the database and receive a response. EHR systems may receive an evaluated immunization history with a forecast or just an immunization history for a patient, depending on the system's capability. These messages are sent through the standard HL7 messaging format and interface connection.

Provider sites that are interested in bi-directional data exchange with the MIIS, and are currently sending immunization administration data by HL7 should check with their EHR vendor to see if their system has the capability to also query and display messages from the MIIS. If your EHR is capable, please contact the MIIS Helpdesk to get started.

For a more comprehensive description of the recent changes to the MIIS, please visit the ContactMIIS Resource Center at www.contactmiis.info, select the Training tab, go to Guides and Resources and click on the 'view' link next to: MIIS Release Notes v4.5. To contact the MIIS Team call 617-983-4335 or email us at miishelpdesk@state.ma.us with any questions.



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www.mass.gov/dph/imm

Make every visit count...Immunize!

HPV Vaccine Campaign

In honor of Cervical Health Awareness Month, the Immunization Program would like to remind providers that the HPV vaccine is cancer prevention! The HPV vaccine is recommended for all 11-12 year old boys and girls to protect against HPV and HPV-related cancers.

There is a MDPH [Blog Article](http://blog.mass.gov/publichealth/) (<http://blog.mass.gov/publichealth/>) targeting a general audience focusing on how HPV vaccine is can-

cer prevention. The blog article features a video from the newly released American Cancer Society's Survivor Stories video bank. Feel free to share this blog within your practice, send it to parents/patients, and/or put in any other communication to your staff and patients. You can also [follow DPH on Twitter](https://twitter.com/massdph) (<https://twitter.com/massdph>) to see immunization related tweets.

MDPH ran a digital billboard

throughout the month of January in 63 locations across 20 cities in Massachusetts to highlight the message "HPV vaccine is cancer prevention!" The billboard points people to the newly created general audience HPV vaccine page on our Immunization Program website. The friendly url is <http://www.mass.gov/dph/hpvvax> and you can find it by visiting the "HPV Vaccine is Cancer Prevention!" in the "Vaccine Preventable Disease" section of the Immunization Program website.

**HPV vaccine
is
cancer prevention.**

www.mass.gov/dph/HPVvax

Massachusetts Department of Public Health *massDOT*



The Immunization Program is committed to promoting the health of Massachusetts' citizens by reducing the burden of vaccine preventable diseases that affect the residents of the Commonwealth. The mission of the program is to prevent disease by ensuring that all individuals are fully immunized in a timely manner.

The Immunization Program develops strategies to ensure that the children and adults of the Commonwealth are appropriately immunized and have access to vaccines.