



MEMO

TO: Local Public Health Units
FROM: Abbi Pierce, MPH 
VFC Manager
RE: 2014-2015 Seasonal Influenza Vaccine Pre-Book Information
DATE: February 12, 2014

Please complete the attached influenza vaccine **pre-book** order form and return it to the North Dakota Department of Health (NDDoH) Immunization Program by **February 28, 2014**. It is very important that pre-book orders are received prior to that date, as the NDDoH has to pre-book influenza vaccine with the federal government.

For the 2014-2015 influenza season, the NDDoH will be supplying influenza vaccine to LPHUs for both VFC-eligible and insured children. LPHUs do not have to participate, but must choose one of the following options:

1. Use state-supplied influenza vaccine for **both insured children and Vaccines For Children (VFC) eligible children** (Medicaid-eligible, American Indian or Alaskan Native, uninsured or underinsured).
2. Use state-supplied influenza vaccine for **VFC-eligible children only**. With this option, it will be your responsibility to separately pre-book private influenza vaccine for insured children.

Vaccine will be allocated based on pre-book orders, previous influenza vaccine orders, doses administered entered into the NDIIS from the 2013-2014 influenza season and your clinic's size. Providers are not guaranteed to receive all the vaccine that they pre-book.

The 2014-2015 influenza season will again offer trivalent and quadrivalent influenza vaccines. Quadrivalent influenza vaccine will protect against two A strains and two B strains. The trivalent vaccine protects against two As and one B strain. NDDoH will do its best to fill pre-booked orders with the brand and presentation pre-booked but providers must understand that it is not guaranteed and orders may be filled with what is available.

Some suggestions for determining the amount of vaccine to prebook:

- Children, 8 years of age and younger, who are receiving influenza vaccine for the first time, will need to receive **two** doses. When giving IIV3 (trivalent inactivated vaccine), IIV4 (quadrivalent inactivated vaccine) or LAIV4 (quadrivalent live attenuated influenza vaccine), the doses should be given at least four weeks apart.
- Use the North Dakota Immunization Information System (NDIIS) to determine the amount of influenza vaccine administered last year. When running a doses administered report in the NDIIS:
 - For VFC-eligible and other-state eligible patients, use "ALL VFC TYPES" for VFC TYPE and "STATE-SUPPLIED" for VACCINE TYPE.
 - For insured children at a non-universal LPHU, use "All Clients" for VFC Type and "Private" for VACCINE TYPE.

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- Consider the Advisory Committee on Immunization Practices (ACIP) recommendation for vaccination of all children 6 months – 18 years. <http://www.cdc.gov/vaccines/hcp/acip-recs/index.html>
- Providers may wish to choose LAIV4 over IIV3 where both are available and otherwise appropriate for children. Vaccination should not be delayed if LAIV4 is not available.

NDDoH-supplied influenza vaccine must not be administered to adults older than 18.

VFC and other state/federal influenza vaccine will be shipped from McKesson in multiple shipments to providers for the 2014-2015 influenza season.

Please contact the NDDoH Immunization Program with any questions at 701.328.3386 or toll-free 800.472.2180.

Enc.

Provider Name: _____ **Provider ID Number:** _____

Vaccine Contact: _____ **Telephone Number:** _____

Will your LPHU be providing NDDoH-supplied influenza vaccine to (select only one): Insured and VFC-eligible children VFC-eligible children ONLY

Will your LPHU conduct school-based influenza vaccine clinics? (select only one): Yes No Not Sure

Vaccine IIV3: trivalent inactivated vaccine IIV4: quadrivalent inactivated vaccine LAIV4: quadrivalent live attenuated influenza vaccine	Brand (Manufacturer)	Age Group	Number of Doses Needed 10-dose increments ONLY
IIV4 (0.25mL pre-filled syringes)	Fluzone [®] (sanofi pasteur)	6 – 35 months	
IIV4 (0.5mL single dose vials)	Fluzone [®] (sanofi pasteur)	3 – 18 years	
IIV4 (0.5mL pre-filled syringes)	Fluzone [®] (sanofi pasteur)	3 – 18 years	
IIV4 (5.0mL multi-dose vial)	Fluzone [®] (sanofi pasteur)	6 months – 18 years	
IIV3 (0.5mL pre-filled syringes)	Fluzone [®] (sanofi pasteur)	3 – 18 years	
IIV3 (multi-dose vials)	Fluzone [®] (sanofi pasteur)	6 months – 18 years	
IIV4 (0.5mL pre-filled syringes)	Fluarix [®] (GlaxoSmithKline)	3 – 18 years	
IIV4 (5.0mL multi-dose vials)	Flulaval [®] (GlaxoSmithKline)	3 – 18 years	
IIV3 (5.0mL multi-dose vials)	Flulaval [®] (GlaxoSmithKline)	3 – 18 years	
IIV3 (0.5mL pre-filled syringes)	Fluvirin [®] (Novartis)	4 – 18 years	
IIV3 (5.0mL multi-dose vials)	Fluvirin [®] (Novartis)	4 – 18 years	
LAIV4 quadrivalent (single dose sprayers)	Flumist [®] (MedImmune)	2 – 18 years	

Please complete this form with your estimated influenza vaccine need for the 2014-2015 influenza season and **fax it to 701.328.2499 by February 28, 2014.**

If pre-book information is not provided, you may be unable to obtain adequate supplies of influenza vaccine. Please call the Immunization Program at 701.328.3386 or toll-free 800.472.2180 if you need assistance with the pre-booking process.