

MEMO

TO: Prevention Partnership Providers and
Local Public Health Units

FROM: Tatia Hardy
Vaccines for Children Coordinator

RE: State-supplied Rotavirus Vaccine Update

DATE: August 26, 2009

Two rotavirus vaccines are currently licensed for use in the United States. Because of similar estimates of efficacy and safety, neither the Advisory Committee on Immunization Practices (ACIP) nor the Academies of Pediatrics (AAP) or Family Physicians (AAFP) state a preference for one vaccine versus the other. Currently, NDDoH supplies providers with RotaTeq®, a three-dose rotavirus vaccine. The North Dakota Immunization Advisory Committee voted to also offer Rotarix®, a two-dose rotavirus vaccine.

Effective immediately, both RotaTeq® and Rotarix® may be ordered through the NDDoH Vaccines For Children (VFC) program for eligible children. Providers should only keep one type (RotaTeq® or Rotarix®) of rotavirus vaccine on hand at their clinic. The revised vaccine order form reflects this change and is enclosed. It can also be downloaded from our website at <http://www.ndhealth.gov/immunize/Providers/Forms>.

RotaTeq®, also known as RV5, is a live, oral vaccine recommended for administration at 2, 4, and 6 months of age. RotaTeq® is provided in a squeezable plastic dosing tube with a twist-off cap designed to allow for the vaccine to be administered directly to infants by mouth.

Rotarix®, also known as RV1, is a live, oral vaccine recommended for administration at 2 and 4 months of age. A third dose at 6 months is not needed. Rotarix® is provided as a lyophilized powder that requires reconstitution before administration. Latex rubber is contained in the Rotarix® oral applicator, so infants with severe (anaphylactic) allergy to latex should not receive Rotarix®.

ACIP recommends that the rotavirus vaccine series be completed with the same product whenever possible. However, vaccination should not be deferred because the product used for a previous dose is unavailable or unknown. **If any dose in the rotavirus series was RotaTeq® or the vaccine product is unknown for any dose in the series, a total of three doses of rotavirus vaccine should be administered.** The maximum age for the first dose of rotavirus vaccine is 14 weeks, 6 days, but the series may be started as early as 6 weeks of age. The minimum interval between doses is 4 weeks. All doses must be administered by age 8 months, 0 days. Rotarix® doses are to be entered into NDIIS as rotavirus (2 dose). The updated recommended childhood and adolescent immunization schedules are enclosed.

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

Enc.



Request for Vaccine

Provider ID Number:	Provider Name:	Date:	
Delivery Address:	City:	State: ND	Zip Code:
Contact Person:	Telephone Number:	<input type="checkbox"/> Check here if this is a new address, telephone number, or contact person.	

Special Delivery Instructions:

All sections must be completed in order for your order to be processed. Allow up to 3 weeks for delivery. Vaccine and materials are shipped on Mondays, Tuesdays, and Wednesdays (weather permitting). Orders will not be filled until the NDDoH has received a doses administered report and temperature charts.

Vaccines	Packaging	Unit size (in doses)	Doses Requested	Doses on Hand
DTaP (For children ≤6 years of age)	Syringes	5		
	Single-dose vials	10		
DTaP/HepB/IPV (Pediatrix®) – <u>IHS only</u>	Syringes	5		
	Single-dose vials	10		
DTaP/Hib/IPV (Pentacel®)	Single-dose vials	5		
DTaP-IPV (Kinrix®)	Single-dose vials	10		
	Syringes	5		
Hepatitis A	Havrix® Syringes	5		
	Havrix® Single-dose vials	10		
	Vaqa® Single-dose vials	10		
Hepatitis B	Syringes	5		
	Single-dose vials	10		
Hib (PedvaxHIB®) – <u>IHS only</u>	Single-dose vials	10		
Hib (ActHIB®)	Single-dose vials	5		
HPV	Single-dose vials	10		
IPV	Multi-dose vials	10		
Meningococcal Conjugate Vaccine (MCV-4)	Single-dose vials	5		
MMR	Single-dose vials	10		
Pneumococcal Conjugate Vaccine (PCV-7)	Syringes	10		
Pneumococcal Polysaccharide Vaccine (PPV-23)	Multi-dose vials	5		
Rotavirus (Rotateq®)	Single-dose tubes	10		
Rotavirus (Rotarix®)	Single-dose vials	10		
Tdap	Boostrix® Syringes	5		
	Boostrix® Single-dose vials	10		
	Adacel® Single-dose vials	10		
	Adacel® Syringes	5		
Varicella (Shipped directly from manufacturer)	Single-dose vials	10		
HBIG (Available to hospitals for perinatal use only)	Single-dose vials	1		
Td (Available for use in children ≥7 years of age who have not completed the primary series of DTaP)	Syringes	10		
DT pediatric (Contact ND Immunization Program for pre-approval before ordering)	Single-dose vials	10		
Influenza (Seasonal, use separate Influenza Pre-book order form)				

Request for Materials

Provider

Provider ID Number:	Provider Name:	Date:	
Delivery Address:	City:	State: ND	Zip Code:
Contact Person:	Telephone No.:	<input type="checkbox"/> Check here if this is a new address, telephone number, or contact person.	

Note: Please allow 2 weeks for delivery of materials

Item	Quantity	Item	Quantity
CDC Vaccine Information Statements		Miscellaneous	
Chickenpox Vaccine		Baby 411 (Ari Brown)	
Diphtheria, Tetanus, and Pertussis (DTaP) Vaccine		Health Record Folder with inserts	
<i>Haemophilus influenzae</i> type B (Hib) Vaccine		Health Record Folder without inserts	
Hepatitis A Vaccine		Immunizations for Babies (A Guide for Parents)	
Hepatitis B Vaccine		Recommended Childhood Immunization Schedule (CDC)	
Human papillomavirus (HPV) Vaccine		Screen Questionnaire for Child and Teen Immunizations	
Inactivated Influenza		Vaccinations for Adults	
Live Attenuated Influenza		When Do Children and Teens Need Vaccinations? (chart)	
Meningococcal Vaccine		State Forms	
MMR Vaccine		Certificate of Immunization (SFN 16038)	
Multiple Vaccines		Lifetime Immunization Record (SFN 13895)	
Pneumococcal Conjugate Vaccine		Request for Vaccine/Materials (SFN 13800)	
Pneumococcal Polysaccharide Vaccine		Temperature Log (Fahrenheit) (SFN 53775)	
Polio Vaccine		Temperature Log (Celsius) (SFN 58468)	
Rotavirus Vaccine		Temperature Log (Fahrenheit and Celsius) (SFN 58469)	
Shingles Vaccine		Vaccine Administration Monthly Report (SFN 53774)	
Tetanus, Diphtheria, and Pertussis Vaccine (Tdap)/ Td		Vaccine Administration Record 2-part (SFN 18385)	
Camera-ready copy: (please circle) Rabies Typhoid Yellow Fever		Vaccine Administration Record (Series) (SFN 50922)	
Brochures		Vaccine Transfer Form (SFN 53766)	
Help Prevent Cervical Cancer: HPV Vaccination for Your Daughter		Vaccine Return and Wastage Form (SFN 53767)	
The HPV Vaccine: Your Cervical Cancer Defense		North Dakota Advisory Committee Immunization Schedule 2008	
What if you don't immunize your child?		North Dakota Immunization Schedule for Indian health Services 2008	
Questions parents ask about baby shots		Adult Tdap Flyer	
Miscellaneous		Vaccine Safety Fact Sheet	
Vaccine Safety Q & A (CHOP)		It's My Turn Poster (Cellphone) 8 X 11	
Reliable Sources of Immunization Information		It's My Turn Poster (Cellphone) 11 X 17	
Vaccine Adverse Events Reporting Form (VAERS)		It's Their Turn Poster (Teens) 8 X 11	
After the Shots... What to do if your child has discomfort		It's Their Turn Poster (Teens) 11 X 17	
Are you 11-19 years old? Then you need to be vaccinated against these serious diseases!		It's Their Turn Fact Sheet	

Fax Completed Form To: NDDoH, Division of Disease Control
Fax No.: 701.328.2499
Phone No.: 701.328.3386 or 800.472.2180

Vaccines For VFC* (regardless of residency) and Non-VFC (Insured) North Dakota Children		
Vaccine	Ages Covered	Eligibility Criteria
Hepatitis B	Birth	<ul style="list-style-type: none"> • <u>Available for administration by hospitals to all children (VFC and insured).</u> • The ACIP and the NDDoH strongly recommend that all children receive the birth dose of hepatitis B vaccine. • Hepatitis B vaccine is VFC-only for all other doses in the hepatitis B series.
Vaccines For VFC Children Only (regardless of state of residence)		
Vaccine	Ages Covered	Eligibility Criteria
DT	6 weeks – 6 years	<ul style="list-style-type: none"> • Only to be administered when DTaP is medically contraindicated. • Call for approval prior to ordering.
DTaP	6 weeks – 6 years	
DTaP/HepB/IPV (Pediarix [®])	6 weeks – 6 years	<ul style="list-style-type: none"> • Approved only for the primary series (i.e., 2, 4, and 6 months). • <u>Only available for administration by IHS facilities or other facilities serving significant American Indian populations.</u>
DTaP-IPV/Hib (Pentacel [®])	6 weeks – 59 months	<ul style="list-style-type: none"> • Approved for use at 2, 4, 6, and 12 – 18 months of age • Pediarix[®] and PedvaxHIB[®] preferred for IHS and other facilities serving significant American Indian populations.
DTaP-IPV (Kinrix [®])	4 years – 6 years	Approved for use as the fifth dose of DTaP and fourth dose of IPV at 4 – 6 years of age.
Hepatitis A	1 – 18 years	<ul style="list-style-type: none"> • Should be routinely administered to children 12-23 months of age.
Hepatitis B	Birth – 18 years	
Hib	6 weeks – 59 months	<ul style="list-style-type: none"> • ActHIB[®] is available in limited supplies. • PedvaxHIB[®] is available to IHS and other facilities with significant American Indian populations.
HPV4 (Gardasil [®])	9 years – 18 years	
Influenza	6 months – 18 years	
IPV	6 weeks – 18 years	
Meningococcal Conjugate (MCV4, Menactra [®])	2 – 18 years	Should be routinely administered to children 11-12 years of age.
MMR	12 months – 18 years	
Pneumococcal Conjugate (PCV7, Prevnar [®])	6 weeks – 59 months	

Pneumococcal Polysaccharide	2 – 18 years	<ul style="list-style-type: none"> Available for high-risk children with one or more of the following conditions: <ul style="list-style-type: none"> Chronic illnesses such as cardiovascular disease, chronic pulmonary disease, diabetes mellitus, alcoholism, chronic liver disease, or CSF leaks. Functional or anatomic asplenia (splenectomy) Conditions associated with immunosuppression, including HIV infection, leukemia, lymphoma, Hodgkin’s disease, multiple myeloma, generalized malignancy, chronic renal failure, nephritic syndrome, or other conditions associated with immunosuppression (organ or bone marrow transplantation); and people receiving immunosuppressive chemotherapy, including long-term high-dose corticosteroids. Cochlear implants
Rotavirus	6 weeks – 8 months, 0 days	<ul style="list-style-type: none"> Both Rotateq[®] (three dose rotavirus vaccine to be administered at 2, 4, and 6 months of age) and Rotarix[®] (two dose rotavirus vaccine to be administered at 2 and 4 months of age) are available.
Td	7 – 18 years	<ul style="list-style-type: none"> Tdap is recommended instead of Td for adolescents and adults. Td is only necessary for children and adolescents who have not completed the primary series of DTaP.
Tdap	10 – 18 years	<ul style="list-style-type: none"> Boostrix[®] is available for adolescents, ages 10 – 18 years. Adacel[®] is available for adolescents, ages 11 – 18 years.
Varicella (Chickenpox)	12 months – 18 years	

**Other State-Supplied Vaccines
(North Dakota residents only, unless specified)**

Vaccine	Ages Covered	Eligibility Criteria
Hepatitis A/B	19 years and older	Only available at high risk settings, including prisons and HIV counseling and testing sites.
HPV4 (Gardasil [®])	19 – 26 years	<p>Available for uninsured and underinsured females</p> <ul style="list-style-type: none"> Females ages 19 – 21 years who are enrolled in Medicaid must be vaccinated with private vaccine and Medicaid should be billed. Females ages 22 – 26 years who are enrolled in Medicaid may be given state-supplied vaccine. Insured females must be vaccinated with private vaccine and insurance should be billed. Includes students of North Dakota colleges and/or universities, regardless of residency.
Meningococcal+ Conjugate (MCV-4, Menactra [®])	17 years – 55 years	<ul style="list-style-type: none"> Available for all college freshman, including those with health insurance and regardless of residency attending North Dakota colleges/universities. Also available for all North Dakota high school

		seniors, regardless of insurance status.
MMR	19 years and older	Available to <u>uninsured</u> or <u>underinsured</u> students born in or after 1957 enrolled in a North Dakota college/university, regardless of residency.
Pneumococcal Polysaccharide	50 – 64 years	Available for high-risk adults with one or more of the following conditions: <ul style="list-style-type: none"> • Chronic illnesses such as cardiovascular disease, chronic pulmonary disease (including asthma), diabetes mellitus, alcoholism, chronic liver disease, or CSF leaks. • Functional or anatomic asplenia (splenectomy) • Conditions associated with immunosuppression, including HIV infection, leukemia, lymphoma, Hodgkin’s disease, multiple myeloma, generalized malignancy, chronic renal failure, nephritic syndrome, or other conditions associated with immunosuppression (organ or bone marrow transplantation); and people receiving immunosuppressive chemotherapy, including long-term high-dose corticosteroids. • Smokers
Pneumococcal Polysaccharide	≥ 65 years	Available to those not enrolled in Medicare.
Shingles	≥ 60 years	Available, <u>in very limited supplies</u> , only at local public health units.
Td/Tdap+	≥ 10 years	<ul style="list-style-type: none"> • Available for all (including those with health insurance) North Dakotans who have or who anticipate having close contact with an infant aged <12 months: <ul style="list-style-type: none"> ○ Parents/guardians of infants < 12 months ○ Childcare providers, regardless of age of children attending childcare ○ Expecting fathers • Available for any uninsured or underinsured North Dakota adults. • Tdap is recommended instead of Td for adolescents and adults.

+The NDDoH also supplies Tdap and MCV4 to local public health units to vaccinate insured children for the middle school entry immunization requirements.

*VFC-eligible children are those who are 18 and younger and meet one of the following criteria:

- No health insurance
- Medicaid eligible
- American Indian or Alaskan Native
- Underinsured – have health insurance, but it does not cover a particular vaccine
 - If your clinic does not have an agreement with a federally qualified health center to vaccinate underinsured children on their behalf, then your clinic must refer underinsured children to a rural health center or federally qualified health center to receive VFC vaccine.

Recommended Childhood and Adolescent Immunization Schedule – August 2009
North Dakota Immunization Advisory Committee

Vaccine	Age	Birth	2 mo	4 mo	6 mo	12 mo	15 mo	18 mo	24 mo	4-6 yr	11-12 yr	13-18 yr				
	Hepatitis B		Hep B #1	Hep B #2		Hep B #3										
Inactivated Poliovirus (IPV)			Pentacel® #1 IPV DTaP Hib	Pentacel® #2 IPV DTaP Hib	Pentacel® #3 IPV DTaP Hib	Pentacel® #4 IPV DTaP Hib				Kinrix® IPV #5 DTaP #5						
Diphtheria, tetanus, pertussis															Tdap	Tdap (if not given at 11 - 12 yr.)
<i>Haemophilus influenzae</i> type b																
Rotavirus (RV)			RV #1 (6 - 14 wks) (must be given by 14 wks, 6 days)	RV #2	RV#3* (must be given by 8 months, 0 days)											
Pneumococcal (Prevnar®)			PCV7 #1	PCV7 #2	PCV #3	PCV7 #4										
Measles, Mumps, Rubella (MMR)						MMR #1				MMR #2						
Varicella (Chickenpox)						Varicella #1				Varicella #2	Varicella series for children not previously vaccinated.					
Hepatitis A						Hep A #1		Hep A #2	Hepatitis A series for children not previously vaccinated							
Influenza				Influenza (yearly for all children 6 months – 18years)												
HPV (Gardasil®)											#1: Now #2: 2 mo. #3: 6 mo.	If not given at age 11 - 12 years				
Meningococcal (Menactra®)											MCV4**					

*If a child receives Rotateq® (3-dose rotavirus vaccine) for the first or second dose in the rotavirus series, then three doses of rotavirus vaccine are needed.

**With the exception of college freshman, children at continued high risk who received the first dose of MCV4 at ages 2 through 6 should receive the second dose at least 3 years after the first. People at continued high risk who received the first dose of meningococcal vaccine at age 7 or older should receive the second dose at least 5 years after the first.



This schedule is to be used as a guide in vaccinating children with vaccines provided by the North Dakota Immunization Program. Please refer to the CDC Recommended Childhood and Adolescent Schedule for more detail and for the catch-up schedule. Please contact the Immunization Program at 800.472.2180 with any questions about vaccine availability or the schedule.

Recommended Childhood and Adolescent Immunization Schedule for Indian Health Services (IHS) – August 2009
North Dakota Immunization Program

Vaccine	Age	Birth	2 mo	4 mo	6 mo	12 mo	15 mo	18 mo	24 mo	4-6 yr	11-12 yr	13-18 yr
	Hepatitis B	Hep B										
Inactivated Poliovirus (IPV)			Pediarix® Hep B IPV DTaP	Pediarix® Hep B IPV DTaP	Pediarix® Hep B IPV DTaP					Kinrix® IPV #4 DTaP #5		
Diphtheria, tetanus, pertussis						DTaP #4					Tdap	Tdap (if not given at 11 - 12 yr.)
<i>Haemophilus influenzae</i> type b (PedvaxHIB®)			Hib #1	Hib #2		Hib #3						
Rotavirus (RV)			RV #1 (6 - 14 wks) (must be given by 14 wks, 6 days)	RV #2	RV #3* (must be given by 8 months, 0 days)							
Pneumococcal (Prevnar®)			PCV7 #1	PCV7 #2	PCV #3	PCV7 #4						
Measles, Mumps, Rubella (MMR)						MMR #1				MMR #2		
Varicella (Chickenpox)						Varicella #1				Varicella #2	Varicella series for children not previously vaccinated.	
Hepatitis A						Hep A #1		Hep A #2	Hepatitis A series for children not previously vaccinated			
Influenza					Influenza (yearly for all children 6 mo. – 18yrs.)							
HPV (Gardasil®)											#1: Now #2: 2 mo. #3: 6 mo.	If not given at age 11 - 12 years
Meningococcal (Menactra®)											MCV4**	

*If a child receives Rotateq® (3-dose rotavirus vaccine) for the first or second dose in the rotavirus series, then three doses of rotavirus vaccine are needed.

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