



**Your Office is Invited to:**

**Learn the Seven Secrets  
To Streamlining Immunization Delivery**



- ◆ Learn about new tools available in Arizona to simplify the process of immunizing your patients on time, every time.
- ◆ Learn about current immunization recommendations, requirements and new and recently approved vaccines.

**The Seven Secrets...**

- 8:00 Registration**
- 8:30 Customer Service in Immunization Delivery**  
The Arizona Partnership for Immunization (TAPI)
- 9:15 Vaccine Handling, Storage and Documentation**  
Arizona Department of Health Services  
Vaccines for Children Program (VFC)
- 10:15 Break**
- 10:30 Giving Shots and New Vaccine Update**  
Maricopa County Community Health Nursing
- 11:15 Immunization Registry Tips and Tools**  
Arizona Department of Health Services  
Arizona State Immunization Information System (ASIIS)
- 12:00 Lunch**
- 12:30 Immunization Resources**  
Community Partners  
The Arizona Partnership for Immunization (TAPI)

**Training Dates and Cities**

Please Circle the date you would like to attend

And fax both sheets to 602.262.2654

<i>June</i>	<i>July</i>	<i>September</i>
Wednesday, June 4 Flagstaff	Thursday, July 17 Flagstaff	Wednesday, September 10 East Valley
Thursday, June 5 Payson	Wednesday, July 23 Show Low	
Thursday, June 12 West Phoenix	Wednesday, July 30 Parker	
Wednesday, June 25 Tucson		

For more information about the training contact  
**Minyon Herring**  
The Arizona Partnership for Immunization (TAPI),  
602.288.7568

**REGISTRATION AND CONFIRMATION**

Practice: \_\_\_\_\_ VFC PIN #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Direct Line: \_\_\_\_\_

**PARTICIPANTS**

Physician, PA, or PNP Name: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

**TELL US ABOUT YOUR PRACTICE**

Estimated number of patients: \_\_\_\_\_ # of Medical Assistants \_\_\_\_\_

# of Physicians: \_\_\_\_\_ # of Physician Assistants: \_\_\_\_\_

# of Nurses: \_\_\_\_\_ # of Nurse Practitioners: \_\_\_\_\_

How does your office report to the ASIIS registry?

Web application     Electronic by Billing system     Paper forms

Is your office using a reminder/recall system?                      Yes    No

Is your office a Vaccines for Children (VFC) Provider?                      Yes    No

What is your greatest challenge in immunizing children in your office? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PLEASE FAX THIS REGISTRATION FORM  
TO (602) 262-2654**

Meeting directions, including room and parking information,  
will be forwarded to you upon confirmation of your registration.

Please contact Minyon Herring with questions: (602) 288-7568

# CHICKENPOX VACCINE

## WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis).

### 1 Why get vaccinated?

Chickenpox (also called varicella) is a common childhood disease. It is usually mild, but it can be serious, especially in young infants and adults.

- It causes a rash, itching, fever, and tiredness.
- It can lead to severe skin infection, scars, pneumonia, brain damage, or death.
- The chickenpox virus can be spread from person to person through the air, or by contact with fluid from chickenpox blisters.
- A person who has had chickenpox can get a painful rash called shingles years later.
- Before the vaccine, about 11,000 people were hospitalized for chickenpox each year in the United States.
- Before the vaccine, about 100 people died each year as a result of chickenpox in the United States.

Chickenpox vaccine can prevent chickenpox.

Most people who get chickenpox vaccine will not get chickenpox. But if someone who has been vaccinated does get chickenpox, it is usually very mild. They will have fewer blisters, are less likely to have a fever, and will recover faster.

### 2 Who should get chickenpox vaccine and when?

#### Routine

Children who have never had chickenpox should get 2 doses of chickenpox vaccine at these ages:

1st Dose: 12-15 months of age

2nd Dose: 4-6 years of age (may be given earlier, if at least 3 months after the 1st dose)

People 13 years of age and older (who have never had chickenpox or received chickenpox vaccine) should get two doses at least 28 days apart.

**Chickenpox**

**3/13/08**

### Catch-Up

Anyone who is not fully vaccinated, and never had chickenpox, should receive one or two doses of chickenpox vaccine. The timing of these doses depends on the person's age. Ask your provider.

Chickenpox vaccine may be given at the same time as other vaccines.

Note: A "combination" vaccine called **MMRV**, which contains both chickenpox and MMR vaccines, may be given instead of the two individual vaccines to people 12 years of age and younger.

### 3 Some people should not get chickenpox vaccine or should wait

- People should not get chickenpox vaccine if they have ever had a life-threatening allergic reaction to a previous dose of chickenpox vaccine or to gelatin or the antibiotic neomycin.
- People who are moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting chickenpox vaccine.
- Pregnant women should wait to get chickenpox vaccine until after they have given birth. Women should not get pregnant for 1 month after getting chickenpox vaccine.
- Some people should check with their doctor about whether they should get chickenpox vaccine, including anyone who:
  - Has HIV/AIDS or another disease that affects the immune system
  - Is being treated with drugs that affect the immune system, such as steroids, for 2 weeks or longer
  - Has any kind of cancer
  - Is getting cancer treatment with radiation or drugs
- People who recently had a transfusion or were given other blood products should ask their doctor when they may get chickenpox vaccine.

Ask your provider for more information.

**4****What are the risks from chickenpox vaccine?**

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The risk of chickenpox vaccine causing serious harm, or death, is extremely small.

Getting chickenpox vaccine is much safer than getting chickenpox disease. Most people who get chickenpox vaccine do not have any problems with it. Reactions are usually more likely after the first dose than after the second.

**Mild Problems**

- Soreness or swelling where the shot was given (about 1 out of 5 children and up to 1 out of 3 adolescents and adults)
- Fever (1 person out of 10, or less)
- Mild rash, up to a month after vaccination (1 person out of 25). It is possible for these people to infect other members of their household, but this is extremely rare.

**Moderate Problems**

- Seizure (jerking or staring) caused by fever (very rare).

**Severe Problems**

- Pneumonia (very rare)

Other serious problems, including severe brain reactions and low blood count, have been reported after chickenpox vaccination. These happen so rarely experts cannot tell whether they are caused by the vaccine or not. If they are, it is extremely rare.

Note: The first dose of **MMRV** vaccine has been associated with rash and higher rates of fever than **MMR** and varicella vaccines given separately. Rash has been reported in about 1 person in 20 and fever in about 1 person in 5. Seizures caused by a fever are also reported more often after **MMRV**. These usually occur 5-12 days after the first dose.

**5****What if there is a moderate or severe reaction?****What should I look for?**

- Any unusual condition, such as a high fever, weakness, or behavior changes. Signs of a serious

allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

**What should I do?**

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** your doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov), or by calling **1-800-822-7967**.

*VAERS does not provide medical advice.*

**6****The National Vaccine Injury Compensation Program**

A federal program has been created to help people who may have been harmed by a vaccine.

For details about the National Vaccine Injury Compensation Program, call **1-800-338-2382** or visit their website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation).

**7****How can I learn more?**

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636 (1-800-CDC-INFO)**
  - Visit CDC website at: [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)



**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**CENTERS FOR DISEASE CONTROL AND PREVENTION**

Vaccine Information Statement (Interim)  
Varicella Vaccine (3/13/08) 42 U.S.C. §300aa-26

# MEASLES, MUMPS & RUBELLA (MMR) VACCINES

## WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis).

### 1 Why get vaccinated?

Measles, mumps, and rubella are serious diseases.

#### Measles

- Measles virus causes rash, cough, runny nose, eye irritation, and fever.
- It can lead to ear infection, pneumonia, seizures (jerking and staring), brain damage, and death.

#### Mumps

- Mumps virus causes fever, headache, and swollen glands.
- It can lead to deafness, meningitis (infection of the brain and spinal cord covering), painful swelling of the testicles or ovaries, and, rarely, death.

#### Rubella (German Measles)

- Rubella virus causes rash, mild fever, and arthritis (mostly in women).
- If a woman gets rubella while she is pregnant, she could have a miscarriage or her baby could be born with serious birth defects.

You or your child could catch these diseases by being around someone who has them. They spread from person to person through the air.

**Measles, mumps, and rubella (MMR) vaccine can prevent these diseases.**

Most children who get their MMR shots will not get these diseases. Many more children would get them if we stopped vaccinating.

### 2 Who should get MMR vaccine and when?

**Children** should get 2 doses of MMR vaccine:

- The first at **12-15 months of age**
- and the second at **4-6 years of age**.

These are the recommended ages. But children can get the second dose at any age, as long as it is at least 28 days after the first dose.

Some **adults** should also get MMR vaccine:

Generally, anyone 18 years of age or older who was born after 1956 should get at least one dose of MMR vaccine,

unless they can show that they have had either the vaccines or the diseases.

Ask your provider for more information.

MMR vaccine may be given at the same time as other vaccines.

Note: A “combination” vaccine called **MMRV**, which contains both MMR and varicella (chickenpox) vaccines, may be given instead of the two individual vaccines to people 12 years of age and younger.

### 3 Some people should not get MMR vaccine or should wait

- People should not get MMR vaccine who have ever had a life-threatening allergic reaction to gelatin, the antibiotic neomycin, or to a previous dose of MMR vaccine.
- People who are moderately or severely ill at the time the shot is scheduled should usually wait until they recover before getting MMR vaccine.
- Pregnant women should wait to get MMR vaccine until after they have given birth. Women should avoid getting pregnant for 4 weeks after getting MMR vaccine.
- Some people should check with their doctor about whether they should get MMR vaccine, including anyone who:
  - Has HIV/AIDS, or another disease that affects the immune system
  - Is being treated with drugs that affect the immune system, such as steroids, for 2 weeks or longer.
  - Has any kind of cancer
  - Is taking cancer treatment with x-rays or drugs
  - Has ever had a low platelet count (a blood disorder)
- People who recently had a transfusion or were given other blood products should ask their doctor when they may get MMR vaccine

Ask your provider for more information.

## 4

### What are the risks from MMR vaccine?

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The risk of MMR vaccine causing serious harm, or death, is extremely small.

Getting MMR vaccine is much safer than getting any of these three diseases.

Most people who get MMR vaccine do not have any problems with it.

#### Mild Problems

- Fever (up to 1 person out of 6)
- Mild rash (about 1 person out of 20)
- Swelling of glands in the cheeks or neck (rare)

If these problems occur, it is usually within 7-12 days after the shot. They occur less often after the second dose.

#### Moderate Problems

- Seizure (jerking or staring) caused by fever (about 1 out of 3,000 doses)
- Temporary pain and stiffness in the joints, mostly in teenage or adult women (up to 1 out of 4)
- Temporary low platelet count, which can cause a bleeding disorder (about 1 out of 30,000 doses)

#### Severe Problems (Very Rare)

- Serious allergic reaction (less than 1 out of a million doses)
- Several other severe problems have been known to occur after a child gets MMR vaccine. But this happens so rarely, experts cannot be sure whether they are caused by the vaccine or not. These include:
  - Deafness
  - Long-term seizures, coma, or lowered consciousness
  - Permanent brain damage

Note: The first dose of **MMRV** vaccine has been associated with rash and higher rates of fever than MMR and varicella vaccines given separately. Rash has been reported in about 1 person in 20 and fever in about 1 person in 5. Seizures caused by a fever are also reported more often after MMRV. These usually occur 5-12 days after the first dose.

## 5

### What if there is a moderate or severe reaction?

#### What should I look for?

- Any unusual condition, such as a high fever, weakness, or behavior changes. Signs of a serious

allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

#### What should I do?

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DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION

Vaccine Information Statement (Interim)  
MMR Vaccine (3/13/08) 42 U.S.C. §300aa-26

# National Immunization Survey

## Comparison of 2007 to 2008 Results

 Grey Shaded Areas = Healthy People 2010 Objective of 90% Has Been Met

	Arizona		United States	
	<u>August '07</u>	<u>March '08</u>	<u>August '07</u>	<u>March '08</u>
4 DTaP	80%	84%	85%	85%
3 Polio	88%	90%	93%	93%
1 MMR	88%	88%	92%	92%
3 Hib	92%	92%	93%	93%
3 Hep B	88%	88%	93%	93%
4 PCV	67%	72%	68%	74%
3 PCV	88%	90%	87%	89%
1 Varicella	83%	86%	89%	90%
4:3:1	78%	82%	83%	83%
4:3:1:3	78%	81%	82%	82%
4:3:1:3:3	75%	76%	81%	80%
4:3:1:3:3:1	71%	73%	77%	78%

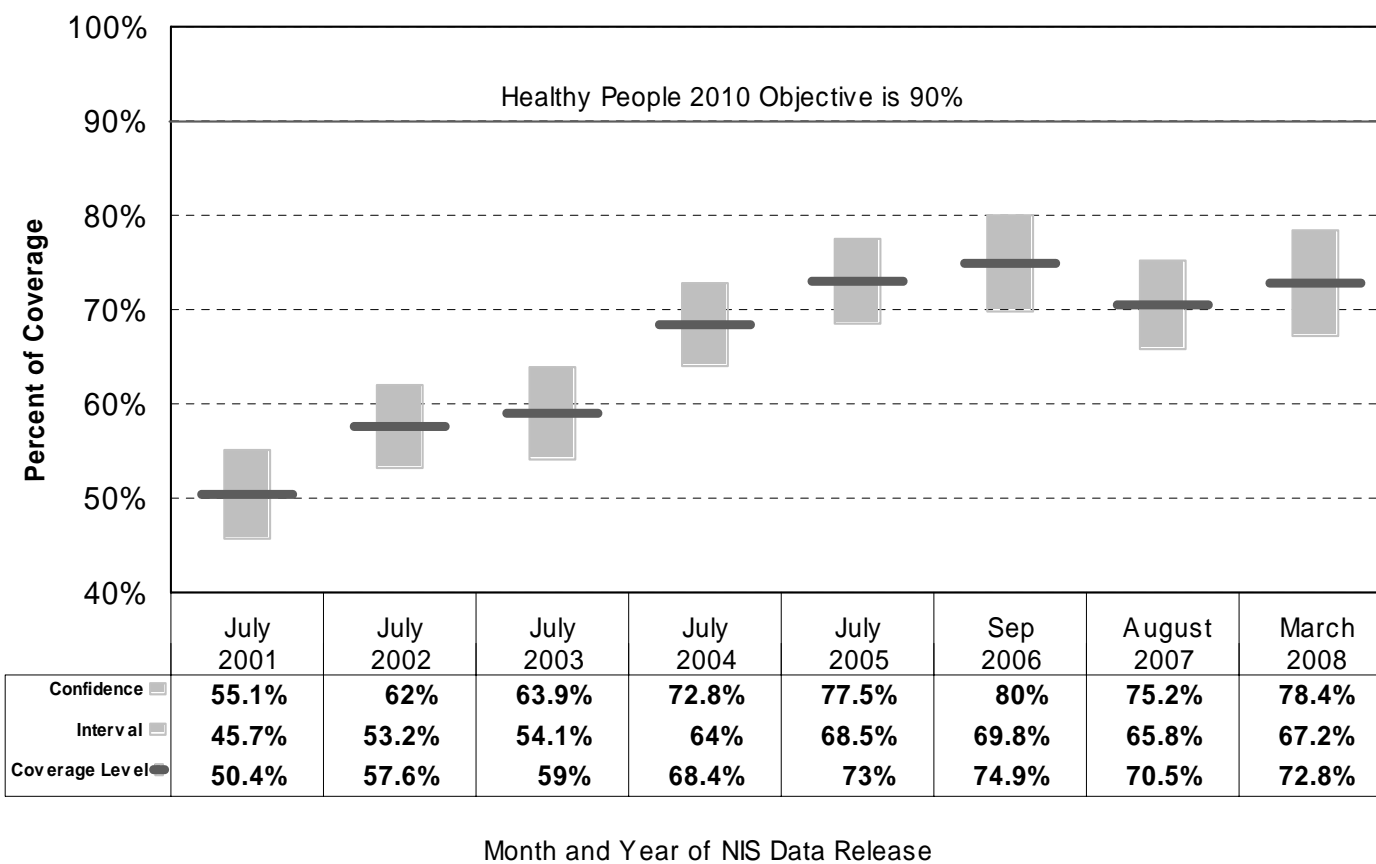
August 2007 NIS data was collected from the first through fourth quarters of 2006 on children born from January 2003 through June 2005.

March 2008 NIS data was collected from the third quarter of 2006 through the second quarter of 2007 on children born from July 2003 through December 2005.

Source: CDC National Immunization Survey Results, 2007-2008.  
Prepared by: ADHS Immunization Program Office, Assessment Unit.

# Arizona National Immunization Survey Results

Children 19 to 35 Months Old with 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hep B , 1 Varicella



Prepared by Arizona Immunization Program Office, Assessment Unit. Based on National Immunization Survey Data.



## *Division of Public Health Services*

*Office of the Assistant Director*

*Public Health Preparedness Services*

150 N. 18<sup>th</sup> Avenue, Suite 120

Phoenix, Arizona 85007-3233

(602) 364-3632 or

Toll-free 1-866-222-2329

(602) 364-3285 FAX

JANET NAPOLITANO, GOVERNOR

SUSAN GERARD, DIRECTOR

### **New Vaccine Requirements for the 2008-2009 School Year**

A vaccine rule amendment adding Tdap and Meningococcal vaccine to school immunization requirements, and lowering the age of the Hepatitis A requirement in Maricopa County child care settings, has been approved. The new rules are in effect as of January 5, 2008. To read the full text of the amended rules, visit the website <http://www.azsos.gov/aar/2007/32/proposed.pdf>.

**1. When does the Hepatitis A rule change go into effect?**

- As of January 5, 2008, children one through five years of age who are attending preschool, Head Start, or child care in Maricopa County are required to receive 2 doses of Hepatitis A vaccine, separated by an interval of 6 months.

**2. Is Hepatitis A vaccination required for school attendance in Maricopa County?**

- No. The Hepatitis A requirement does not apply to grades Kdg-12. A five-year-old who is enrolled only in kindergarten is not required to be vaccinated against Hepatitis A.

**3. When will students be required to have Meningococcal Vaccine (MV) and Tdap?**

Students eleven years and older, who have had 5 years pass since their last tetanus/diphtheria vaccine dose, are required to receive Tdap according to the schedule below. Students eleven years and older are required to receive MV according to the schedule below.

- September 1, 2008 for a child entering 6th grade
- September 1, 2009 for a child entering 6th and 7th grades
- September 1, 2010 for a child entering 6th through 8th grades
- September 1, 2011 for a child entering 6th through 9th grades
- September 1, 2012 for a child entering 6th through 10th grades
- September 1, 2013 for a child entering 6th through 11th grades
- September 1, 2014 for a child entering 6th through 12th grades

**4. What if a student has not completed the first three doses of tetanus/diphtheria vaccine?**

- As of September 1, 2008, students eleven years and older who are beginning or completing the tetanus/diphtheria series must receive one dose of Tdap as part of the 3-dose tetanus/diphtheria series. Students starting the series should receive a Tdap as dose #1, followed by Td for doses #2 and #3.

**5. What if a student is due for the 10-year tetanus/diphtheria booster before Tdap is required for his/her grade level?**

- As of September 1, 2008, students eleven years and older who have had 10 years pass since the last tetanus/diphtheria vaccine dose must receive a Tdap as their first tetanus/diphtheria booster.

**6. If a child has received a Tdap booster, when is the next booster required?**

- A Td booster is required 10 years after the child's Tdap booster. Only one dose of Tdap is currently recommended per person, per lifetime.

**Children 11 Years and Older Need These Immunizations to Attend School in Arizona  
2008-2009 School Year**

<b>Immunizations</b>	<b>1<sup>st</sup> Dose</b>	<b>2<sup>nd</sup> Dose</b>	<b>3<sup>rd</sup> Dose</b>	<b>4<sup>th</sup> Dose</b>	<b>5<sup>th</sup> Dose</b>
<b><u>(DTaP/DTP) Diphtheria, Tetanus &amp; Pertussis, (DT) Diphtheria &amp; Tetanus, (Td) Tetanus &amp; Diphtheria</u></b>	Required	Required	Required	Required if dose #1 was given before 12 months of age.	
An interval of at least 4 weeks is required between the first doses of <b>DTaP/DTP/DT/Td</b> . An interval of 6 months is required between the last two doses.					
<b><u>(Tdap) Tetanus, Diphtheria &amp; Pertussis</u></b>  <b>(New Requirement)</b>	Required for 6 <sup>th</sup> grade students who are 11 years and older and have had 5 years pass since their last DTaP/DTP//Td dose.				
Students 11 years and older in all grades are required to receive one dose of <b>Tdap</b> if 10 years have passed since their last dose of DTaP/DTP/DT/Td, or if they are in the process of receiving their first 3 doses of tetanus/diphtheria vaccine. Students who have received 1 dose of Tdap will need a Td booster after 10 years.					
<b><u>(MV) Meningococcal Vaccine</u></b>  <b>(New Requirement)</b>	Required for 6 <sup>th</sup> grade students who are 11 years and older.				
A dose of <b>MV</b> is recommended at 11 years of age. Because MV is licensed for use in children 2 years and older, doses given between 2 and 11 years of age are valid and acceptable.					
<b><u>(IPV/OPV) Polio</u></b>	Required	Required	Required	Not required if dose #3 was given at 4+years. 4 doses meet the requirement even if all were given in the first year of life.	
An interval of at least 4 weeks is required between all <b>Polio</b> doses.					
<b><u>(MMR) Measles, Mumps, &amp; Rubella</u></b>	Required	Required			
<b>MMR #1</b> is due at 12-15 months of age. <b>MMR #2</b> may be given 1 month after <b>MMR #1</b> . <b>MMR #2</b> is required for grades K-12.					
<b><u>(Hep B) Hepatitis B</u></b>	Required	Required	Required. Minimum age for final Hep B dose is 24 weeks.	Required only if dose #3 was given before 24 weeks of age.	
<b>Hep B #1</b> may be given at birth. Dose #2 is due 4-8 weeks after dose #1. Dose #3 is due 2-5 months after dose #2, at least 4 months after dose #1 and no sooner than 24 weeks of age. A 2-dose adolescent series may be given to children 11-15 years of age over a 4-6 month period.					
<b><u>Varicella (Chicken Pox)</u></b>	Required	Required if dose #1 was given at 13+ years of age.			
In the 2008-2009 school year, children enrolled in preschool, kindergarten and grades 1, 2, 3, 4, 7, 8, 9 and 10 are required to be immunized against varicella (chicken pox) or have a history of chicken pox disease. Parental recall of chicken pox is acceptable. One dose of varicella vaccine meets the requirement for all children except those who receive varicella #1 at <u>13+ years of age</u> . Children who receive the 1 <sup>st</sup> dose of varicella vaccine at 13+ years of age need 2 doses, spaced at least 1 month apart. Note: If MMR and Varicella vaccine doses were not given on the same day, they must be given at least 28 days apart.					