



# Communiqué

## Vaccine Storage and Handling Practices

- To retain their potency and to be effective, most vaccines must be kept refrigerated between +2°C and +8°C at all times. For detailed vaccine storage and handling information, please refer to the specific product monograph.
- Always store vaccines on the middle shelves of the refrigerator. Never store vaccines in refrigerator door shelves as they may be exposed to warmer temperatures.
- Leave space between the vaccine packages in the refrigerator to allow air to circulate.
- Place vaccines of the same type together.
- Check vaccine expiry dates regularly. Always move vaccines with shorter expiry dates to the front of the refrigerator so that they can be used first. Always check expiry dates before you use vaccines. Remove expired vaccines and return them to your vaccine supply source.
- Storing filled water bottles on the lower shelf and the door of the vaccine refrigerator may help maintain an even, stable temperature inside the refrigerator.
- **ALL VACCINES:** Take vaccines out of the refrigerator only when ready to administer.
- **MULTI-DOSE FORMAT:** Return unused vaccine to the refrigerator immediately after the required dose has been drawn up. Mark the date on all multi-dose vials when the first dose is withdrawn. Once opened, multi-dose vials must be used within 30 days (unless otherwise indicated on the product monograph). Aseptic technique for the withdrawal of vaccines must be followed at all times.
- Protect all vaccines from sunlight and fluorescent light.
- Never leave vaccines out on the counter or the floor.

Reference: Vaccine Storage and Handling Guidelines, MOHLTC, 2006.



### REMINDER: ORDERING VACCINES FOR YOUR FACILITY!

You may order Publicly Funded vaccine any time during the week. Only orders placed by Tuesday 3:00 pm will be filled and ready for pick up the following day (Wednesday) at 3:00 pm. Any orders received after Tuesday at 3:00 pm will be filled the following week. A copy of the current fridge temperature log must accompany all faxed orders (519-426-4767).

Pick up of vaccine orders in Simcoe will be available after 3:00 pm on Wednesdays .

In Haldimand, orders placed by Tuesday 3:00 pm will be available at the designated depot on Wednesdays after 3:00 pm.

# 2011 ROUTINE PUBLICLY FUNDED VACCINE SCHEDULE FOR HEALTHY CHILDREN

| Age          | Vaccine #1  | Vaccine #2                               | Vaccine #3                               |
|--------------|-------------|--|--|
| 2 months     | Pediacel #1 | Prevnar <sup>®</sup> 13 #1<br>(low risk) | Rotarix #1<br>(oral)                     |
| 4 months     | Pediacel #2 | Prevnar <sup>®</sup> 13 #2<br>(low risk) | Rotarix #2<br>(oral)                     |
| 6 months     | Pediacel #3 |  |  |
| 12 months    | MMR         | Men C                                    | Prevnar <sup>®</sup> 13 #3<br>(low risk) |
| 15 months    | Varicella   |  |  |
| 18 months    | Pediacel #4 |  |  |
| 4 to 6 years | Quadracel   | MMRV<br>(Priorix-Tetra)                  |  |

- **Rotarix** = Recommended to prevent gastroenteritis caused by a rotavirus infection in young children. Can start after 6 weeks of age and completed by 16 weeks of age.
- **Pediacel** = diphtheria, pertussis, polio, tetanus, Hib
- **Priorix-Tetra (MMRV)** = measles, mumps, rubella (german measles) and varicella (Publicly funded 4 to 11 years of age) See MMR, Varicella and MMRV Eligibility and Schedules (MOH Attachment B)
- **Quadracel** = diphtheria, pertussis, polio, tetanus
- **Men C** = One dose if > 1 year. One-year-old children immunized in infancy (i.e. < 1 year of age) require another dose at least one year after the last dose for enhanced protection.
- **Prevnar<sup>®</sup> 13** = A three dose schedule for healthy (low risk) children - 2 primary doses at 2 and 4 months of age and a booster dose at 12 months. For high risk\* children the schedule is three doses at two, four and six months and then a booster at 15 months. Refer to Pevnar 13 Eligibility Schedule (Tables 2 and 4)



# Changes to Publicly Funded Immunization Schedules for Ontario August 2011

**Rotavirus vaccine (Rotarix™)** will provide protection against rotavirus infection. According to the product monograph the two dose vaccine should be administered orally at two and four months of age. NACI recommends that the first dose be administered between 6 weeks and before 15 weeks of age. There should be a minimum interval of four weeks between doses. The two dose schedule of Rotarix™ must be completed by 24 weeks of age.

**Measles, Mumps, Rubella and Varicella Vaccine (Priorix-Tetra™)** Starting August 2011, the second dose of varicella and MMR vaccines will be offered as combined MMRV at four to six years of age. The Ministry is continuing to recommend the first dose of MMR at 12 months of age and the first dose of varicella at 15 months of age, as separate injections. MMRV is not recommended for children less than four years of age due to increased risk of febrile seizures. It is highly recommended that children receive the full immunization series for measles, mumps, rubella and varicella prior to school entry. The minimal interval between two univalent varicella vaccines or the varicella and MMRV vaccine is **three months**. If the MMR and varicella vaccines are not given at the same clinic visit at different anatomical sites, then a minimum of **28 days** must be observed between doses. **MMRV is publicly funded** for children four to eleven years of age.

## **Measles, mumps and Rubella vaccine (MMR II and Priorix)**

A second dose of MMR is recommended for young adults (18-25 years), post secondary students, persons who received killed measles vaccine (1967 – 1970), health care workers or those who plan to travel internationally.

## **Two dose varicella vaccine series (Varilrix® and Varivax® III)**

Two doses of varicella are now recommended as part of the childhood schedule, where, previously, only one dose was recommended. A two dose regimen will be more effective in controlling breakthrough disease and the chickenpox infection and potential complications.

A second dose of the varicella will be routinely offered to children born on or after January 1, 2000 and who are at least four years of age in the form of MMRV vaccine. For children who have already received two doses of the MMR vaccine and one dose of the varicella vaccine, they can receive a second dose of the univalent varicella vaccine.

The minimum interval between two univalent varicella vaccine and the varicella and MMRV vaccine is **three months**. However, the minimum interval between MMR and varicella is still no less than **28 days**.

## **Tetanus, diphtheria and acellular pertussis vaccine (Adacel® and Boostrix®)**

Under the publicly funded immunization program, it is recommended that adolescents aged 14 to 16 years of age (with eligibility until 18 years of age) receive Tdap vaccine ten years after their four to six years old booster of DTaP-IPV.

*Reference: Publicly Funded Immunization Schedules for Ontario- August 2011*

All adults between 19 and 64 years of age are eligible to receive one lifetime dose of Tdap (tetanus, diphtheria and acellular pertussis) if they have not received a booster dose at 14 to 16 years of age. Once an adult has received a dose of Tdap, he or she should continue to get a Td (tetanus, diphtheria) booster every ten years.

*Reference: Publicly Funded Immunization Schedule for Ontario- August 2011*

*Questions and Answers for Health Care Providers, MOHLTC.*

## QUICK TIPS

- ➔ It is recommended that vaccines mixed with diluents are done so with diluent provided by the manufacturer for that product (right product - right diluent). Diluents must be stored between 2° C and 8° C, the same as the vaccine. If warm diluents are mixed with cold vaccine from the fridge, the potency of the vaccine may be affected.
- ➔ The packaging for Priorix and Priorix-Tetra are very similar. When you receive Priorix-Tetra from the Health Unit it will be marked with a green marker to distinguish it from the Priorix. We suggest that any Priorix-Tetra you have already received and is stored in your facility fridge, be marked in a similar fashion so there are no incidence of wrong vaccine being given.
- ➔ When returning non-useable vaccine to the Health Unit, that is to be returned to the Ontario Government Pharmacy, please remember to label the package with your facility name. We have received packages without labels and are unable to account for the source of the return.

## The Trivalent Influenza Vaccine 2011-2012

- split virus, inactivated, trivalent vaccine
- contains the following three strains (2011-2012 formula)
  - A/California/7/2009 (H1N1)-like virus
  - A/Perth/16/2009(H2N3)- like virus
  - B/Brisbane/60/2008-like virus
- Agriflu\*supplied in single dose pre-filled syringes
- Vaxigrip® supplied in single dose vials

### Vaxigrip® Sanofi Pasteur Limited

**Contents:** Thimerosal, sodium phosphate, isotonic sodium chloride, formaldehyde,

Triton® X-100, trace amounts sucrose and neomycin

Cultivated in embryonated eggs.

Does not contain latex.

**(Stable only 7 days after first puncture)**

Do not freeze.

Protect from light.

### Agriflu\* Novartis Vaccines

**Contents:** Trace amounts of neomycin, kanamycin, egg proteins, ovalbumin (residual), formaldehyde, polysorbate 80, cetytrimethylammonium bromide (CTAB), barium (residual) or citrates (residual).

Propagated in embryonated hen's eggs.

Does not contain latex.

**Shelf life 1 year under cold chain.**

Do not freeze.

Protect from light.

Warm to room temperature before injecting.

## Recommended Influenza Vaccine Dosage, by Age, 2011-2012

| Age Group     | Dose & Route | Number of Doses |
|---------------|--------------|-----------------|
| 6 - 35 months | 0.5 mL IM    | 1 or 2*         |
| 3 - 8 years   | 0.5 mL IM    | 1 or 2*         |
| > 9 years     | 0.5 mL IM    | 1               |

\*Previously unvaccinated children <9 years of age require two doses of TIV, with a minimum interval of four weeks between doses. Eligible children <9 years if age who have properly received one or more doses of TIV in the past are recommended to receive one dose per season thereafter.

- The Vaccination site for infants and children under one year is the vastus lateralis in the anterolateral area of the middle of the upper thigh. The deltoid muscle is preferred for children over 1 year of age to adults.
- Pre-filling of influenza vaccine into safety engineered plastic syringe for extended periods is not recommended. The manufacturer cannot guarantee the stability of the vaccine. Administer vaccine immediately after it is withdrawn from the multi-dose vial. Neither product contains latex.
- Influenza vaccine must be maintained under cold chain conditions (2° C to 8° C) and protected from light.

## Recommended Recipients of Influenza Vaccine for 2011-2012 Season

The influenza vaccines are indicated for active immunization against influenza caused by specific strains of influenza virus, contained in the vaccine, for adults and children **6 months of age and older**.

Although the current influenza vaccine can contain one or more of the antigens administered in previous years, annual vaccination using the current vaccine is necessary because immunity declines a in the year following vaccination.

**The National Advisory Committee on Immunization (NACI) encourages annual influenza vaccination for all Canadians who have no contraindications.**

Vaccine should be offered to both children and adults up to and even after influenza activity is documented in a community.

**Please carefully read the product monographs for Agriflu\* and Vaxigrip®.**

If you have any questions regarding influenza vaccine, please contact any member of the Vaccine Preventable Disease Program (519) 426-6170 or (905) 318-6623.

*Communiqué is a newsletter distributed by the Haldimand-Norfolk Health Unit for those who work in the area of Vaccines and Vaccine Preventable Diseases. If you have ideas or suggestions of topics for future Communiqués, please contact the Health Unit.*



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