The presentation will begin shortly. There will be no audio until then.

How to
• First, a question commonly asked of the immunization program will be presented.
• Next, answer choices will be shown.
• A poll will appear on the right side of your screen.
• Discuss the question amongst your group and choose an answer.
• All participants will have 1 minute to answer.
• The correct answer and the results will be shown after 1 minute.
• Percentages will be shown, not individual responses.

May frequently asked questions
Abbi Berg, VFC/AFIX manager
Q1: HEPLISAV-B™ SCHEDULE - ROUTINE

Archie is starting his career as a nurse, and he is in need of Hepatitis B vaccine. Your pharmacy has recently ordered you the new Hep B vaccine, HEPLISAV-B™. You give Archie a dose today. When should he receive his second dose? How many more doses will he need?

- A) One – two months later (final dose)
- B) Two months and the third and final dose in four months
- C) Two months and the third and final dose in six months
- D) HEPLISAV-B™ is a one dose series.
Q2: HEPLISAV-B™ MIXED SCHEDULE

Veronica is another new hire who had a dose of hepatitis B during school, but she is unsure of what brand. All you have on hand is HEPLISAV-B™. What schedule should Veronica follow to complete her hepatitis B series?

- A) The series would be completed with one dose of HEPLISAV-B™ (two doses total)
- B) She would need two additional doses of any hepatitis B vaccine following the routine HEP B schedule (0, 1-2, 6 for three doses total)
- C) It is not recommended to give a mixed schedule with HEPLISAV-B™
- D) Because the brand was unknown she should repeat the entire HEP B series
Q3: ENGERIX®, HEPLISAV-B™, HEPLISAV-B™

Jughead came prepared to the office today with his out of state immunization record. He received three doses of hepatitis B vaccine, but not following the routine schedule. Is this series valid, or does he need an additional dose?

ENGHERIX® - 1/5/2018
HEPLISAV-B™ - 3/5/2018
HEPLISAV-B™ - 4/5/2018

- A) Using different brands is never recommended and this would not be a valid series.
- B) He would need to repeat the entire series.
- C) A three dose hepatitis B schedule requires 16 weeks between doses one and three so he would need an additional dose.
- D) Because both doses of HEPLISAV-B™ are valid, his series is complete.


- A) Using different brands is never recommended and this would not be a valid series.
- B) He would need to repeat the entire series.
- C) A three dose hepatitis B schedule requires 16 weeks between doses one and three so he would need an additional dose.
- D) Because both doses of HEPLISAV-B™ are valid, his series is complete.
HEPLISAV-B™ RESOURCES

- THE ACIP RECENTLY RELEASED THE MMWR CONCERNING USE OF HEPLISAV-B™ VACCINE.
  HTTPS://WWW.CDC.GOV/MMWR/VOLUMES/67/WR/MM6715A5.HTM
- VACCINE IS A TWO DOSE SERIES LICENSED FOR ADULTS (18 YEARS AND OLDER).
- SCHEDULE 0, 1 MONTH
- HEPATITIS B VACCINE WITH AN ADJUVANT.
- VACCINE TRIALS HAVE SHOWN VERY HIGH EFFICACY.
  - 90-100% EFFICACY COMPARED TO 70-90% IN ENGERIX B® MANUFACTURED BY GSK
  - VACCINE MANUFACTURED IS DYNAVAX. THIS IS THEIR FIRST VACCINE.
- USE IN HIGH RISK GROUPS WILL BE EVALUATED BY THE ACIP IN THE NEAR FUTURE

SHINGRIX® QUESTIONS

Q4: SHINGRIX® GIVEN SQ
SWIGHT WAS THE FIRST PATIENT TO RECEIVE SHINGRIX® IN OUR OFFICE, AND OUR NURSE GAVE IT SUBCUTANEOUSLY BECAUSE THAT IS HOW ZOSTAVAX® WAS GIVEN. IS THIS A VALID DOSE?
DWIGHT WAS THE FIRST PATIENT TO RECEIVE SHINGRIX® IN OUR OFFICE, AND OUR NURSE GAVE IT SUBCUTANEOUSLY BECAUSE THAT IS HOW ZOSTAVAX® WAS GIVEN. IS THIS A VALID DOSE?

• A) YES. THIS VACCINE CAN BE GIVEN EITHER SQ OR IM.
• B) YES. HOWEVER EDUCATION SHOULD BE DONE SO THE MISTAKE IS NOT MADE AGAIN.
• C) NO. THIS VACCINE MUST BE GIVEN INTRAMUSCULARLY.

Q5: INTERVAL BETWEEN SHINGRIX® AND ZOSTAVAX®

KEVIN RECEIVED ZOSTAVAX® 6 MONTHS AGO. HE IS NOW INTERESTED IN RECEIVING SHINGRIX®. CAN HE RECEIVE THIS VACCINE NOW?
Kevin received Zostavax® 6 months ago. He is now interested in receiving Shingrix®. Can he receive this vaccine now?

- A) No. Shingrix® is not recommended for individuals who have already been vaccinated for shingles.
- B) No. There must be at least one year in between doses (min of 11 months).
- C) Yes. The minimum interval between shingles vaccines is 8 weeks.
- D) Yes. The minimum interval between shingles vaccines is 6 months.

Q6: Shingrix® recommended vs minimum interval

Angela received her Shingrix® in March. She would like her second dose now. NDIS says she can receive her second dose now according to the minimum interval, but the recommended interval is 6 months. Can she get it today?
ANGELA RECEIVED HER SHINGRIX® IN MARCH. SHE WOULD LIKE HER SECOND DOSE NOW. NDIS SAYS SHE CAN RECEIVE HER SECOND DOSE NOW ACCORDING TO THE MINIMUM INTERVAL, BUT THE RECOMMENDED INTERVAL IS 6 MONTHS. CAN SHE GET IT TODAY?

• A) YES. PROVIDERS CAN ALWAYS USE THE STATED MINIMUM INTERVALS.
• B) YES. SHE CAN RECEIVE IT TODAY BUT IT WOULD BE BETTER TO WAIT 6 MONTHS.
• C) NO. THIS IS AN ERROR IN NDIS AND YOU MUST WAIT 6 MONTHS.
• D) NO. PROVIDERS SHOULD NEVER USE THE MINIMUM INTERVAL FOR ADMINISTRATION.

Q7: SHINGLES VACCINE POST RASH/OUTBREAK

OSCAR HAD A SHINGLES OUTBREAK ABOUT A MONTH AGO AND IS STILL EXPERIENCING SOME SYMPTOMS. HE WANTS TO PROTECT HIMSELF FROM FUTURE OUTBREAKS. SHOULD WE RECOMMEND SHINGLES VACCINE FOR HIM? IF SO, WHEN?
OSCAR HAD A SHINGLES OUTBREAK ABOUT A MONTH AGO AND IS STILL EXPERIENCING SOME SYMPTOMS. HE WANTS TO PROTECT HIMSELF FROM FUTURE OUTBREAKS. SHOULD WE RECOMMEND SHINGLES VACCINE FOR HIM? IF SO, WHEN?

- A) YES. HE CAN RECEIVE THE SHINGLES VACCINE NOW WHICH CAN PREVENT FUTURE OUTBREAKS.
- B) NO. THE SHINGLES RASH ELICITS THE SAME RESPONSE AS THE VACCINE, SO THE VACCINE IS NO LONGER NEEDED.
- C) YES, HOWEVER YOU SHOULD WAIT UNTIL SYMPTOMS SUBSIDE.

CHANGE IN LANGUAGE

- IF A PATIENT IS EXPERIENCING AN EPISODE OF HERPES ZOSTER, VACCINATION WITH SHINGRIX® SHOULD BE DELAYED UNTIL THE ACUTE STAGE OF THE ILLNESS IS OVER AND SYMPTOMS ABATE.
- DIFFERENT FROM PREVIOUS RECOMMENDATIONS 6-12 MONTHS AFTER RASH FOR THE USE OF ZOSTAVAX® FOLLOWING SHINGLES OUTBREAK.
Q8: SHINGRIX® DELIVERY AND BILLING

Our clinic would like to offer SHINGRIX® vaccine to Medicare patients. In the past we have always referred patients over 65 years of age wanting ZOSTAVAX® to their pharmacy. Which of the following would be true for us once we offer SHINGRIX®?

• A) Clinics may administer SHINGRIX® but must use TRANSACT RX (a special billing program) to bill Medicare Part B.

• B) SHINGRIX® will be included in Medicare Part B so there should no longer be a problem with administering in the clinic.

• C) SHINGRIX® vaccine is refrigerated so the dose can safely be transported from the clinic to the pharmacy for administration.

• D) Both A and C are true.
SHINGRIX® AND PRIVATE INSURANCE

- BECAUSE OF DIFFICULTY WITH THE DELIVERY SYSTEM AND BILLING MEDICARE PART D IN A CLINIC SETTING THE ACIP IS HOPING THAT BY RECOMMENDING THE VACCINE AFTER AGE 50 WILL ALLOW FOR MORE VACCINATION WHILE STILL ON PRIVATE INSURANCE.
- MAJORITY OF INSURANCE CARRIERS IN NORTH DAKOTA HAVE ALREADY ADDED SHINGRIX® TO THEIR COVERAGE.

Q9: SHINGRIX® STORAGE AND HANDLING

WHILE I WAS OUT MY BACK UP CONTACT INCORRECTLY PUT SHINGRIX® IN THE FREEZER, JUST LIKE SHE WOULD FOR ZOSTAVAX®. UNFORTUNATELY IT WASN'T DISCOVERED UNTIL 5 PEOPLE HAD RECEIVED THE VACCINE. ARE THESE DOSES VALID? IS THE VACCINE VIABLE?

- A) THE VACCINE IS NOT VIABLE AND ALL OF THE DOSES NEED TO BE REPEATED.
- B) SHINGRIX® CAN BE REFRIGERATED OR FROZEN, SO ALL DOSES WOULD BE CONSIDERED VALID.
- C) THE DOSES WOULD BE CONSIDERED VALID BUT EDUCATION SHOULD BE COMPLETED SO THE MISTAKE DOES NOT HAPPEN AGAIN.
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DIFFERENCE BETWEEN ZOSTER VACCINES

- HTTP://WWW.PHARMACIST.COM/SITES/DEFAULT/FILES/FILE S/2018ZOSTERVACCINESCHARTV9FINAL.PDF
- APHA – AMERICAN PHARMACISTS ASSOCIATION

REFERENCES FOR SHINGRIX® AND HEPLISAV-B™

Q10: HEP A UNDER 12 MONTHS

Little Phyllis will be traveling with her family to South America. They will be leaving in two weeks. She is only 9 months old and is here for a well visit prior to their departure. The mother is worried about Hepatitis A. What would you recommend for this family?

- A) The child should be recommended not to travel outside of the U.S. until they are old enough to be vaccinated against Hep A.
- B) Phyllis can receive a dose of Hepatitis A vaccine now and would just finish the series with her second dose after the appropriate minimum interval.
- C) Phyllis can receive a dose of Hepatitis A vaccine now but would need two valid doses after she turns one.
- D) Phyllis should receive half of a pediatric dose based on her current age.
LITTLE PHYLLIS WILL BE TRAVELING WITH HER FAMILY TO SOUTH AMERICA. THEY WILL BE LEAVING IN TWO WEEKS. SHE IS ONLY 9 MONTHS OLD AND IS HERE FOR A WELL VISIT PRIOR TO THEIR DEPARTURE. THE MOTHER IS WORRIED ABOUT HEPATITIS A. WHAT WOULD YOU RECOMMEND FOR THIS FAMILY?

- A) THE CHILD SHOULD BE RECOMMENDED NOT TO TRAVEL OUTSIDE OF THE U.S. UNTIL THEY ARE OLD ENOUGH TO BE VACCINATED AGAINST HEP A.
- B) PHYLLIS CAN RECEIVE A DOSE OF HEPATITIS A VACCINE NOW AND WOULD JUST FINISH THE SERIES WITH HER SECOND DOSE AFTER THE APPROPRIATE MINIMUM INTERVAL.
- C) PHYLLIS CAN RECEIVE A DOSE OF HEPATITIS A VACCINE NOW BUT WOULD NEED TWO VALID DOSES AFTER SHE TURNS ONE.
- D) PHYLLIS SHOULD RECEIVE HALF OF A PEDIATRIC DOSE BASED ON HER CURRENT AGE.

Q11: HEP A OVER 40 YEARS

RYAN WAS CONTACTED, AS HE WAS RECENTLY EXPOSED TO HEPATITIS A WHILE AWAY ON VACATION. RYAN IS A 50 YEAR OLD PATIENT. SHOULD HE RECEIVE VACCINE, IG, OR BOTH?

- A) HE SHOULD RECEIVE HEPATITIS A VACCINE.
- B) DEPENDING ON CERTAIN CRITERIA LIKE AGE OR HIGH RISK CONDITION HE MAY ALSO NEED TO RECEIVE IMMUNOGLOBULIN.
- C) BASED ON HIS AGE HE SHOULD ONLY RECEIVE IMMUNOGLOBULIN.
- D) HE IS NOT ELIGIBLE TO RECEIVE EITHER.
- E) BOTH A AND B ARE CORRECT.
RYAN WAS CONTACTED, AS HE WAS RECENTLY EXPOSED TO HEPATITIS A WHILE AWAY ON VACATION. RYAN IS A 50 YEAR OLD PATIENT. SHOULD HE RECEIVE VACCINE, IG, OR BOTH?

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- E) BOTH A AND B ARE CORRECT.

UPDATED INFANT HEPATITIS A RECOMMENDATIONS

- IN FEBRUARY, THE ACIP VOTED TO RECOMMEND HEPATITIS A VACCINE FOR INFANTS 6-11 MONTHS OF AGE WHO WILL BE TRAVELING TO HEPATITIS A ENDEMIC AREAS.
- THESE DOSES ARE NOT COUNTED TOWARDS THEIR VACCINATION SCHEDULE AFTER 1 YEAR OF AGE.
- DOSES WILL SHOW AS INVALID IN NDIIS, BUT SHOULD STILL BE ADMINISTERED TO PROTECT THE CHILD FROM INFECTION.
- IF POSSIBLE THE NEXT DOSE (FIRST IN ROUTINELY RECOMMENDED SERIES) SHOULD BE GIVEN SIX MONTHS AFTER THE INVALID DOSE, HOWEVER IT WILL STILL BE COUNTED AS VALID AS LONG AS THE CHILD IS AT LEAST ONE YEAR OLD WHEN THEY RECEIVE THE DOSE.

UPDATED HEPATITIS A RECOMMENDATIONS

- ACIP VOTED TO RECOMMEND THAT HEPATITIS A VACCINE BE ADMINISTERED FOR POST EXPOSURE PROPHYLAXIS TO ANYONE 12 MONTHS AND OLDER.
- PREVIOUSLY, IG, NOT HEPATITIS A VACCINE, WAS RECOMMENDED FOR POST EXPOSURE PROPHYLAXIS AGAINST HEPATITIS A IN PEOPLE OLDER THAN 40.
- SOME INDIVIDUALS WILL ALSO NEED IG, IN ADDITION TO HEPATITIS A VACCINE, FOR POST EXPOSURE PROPHYLAXIS.
- THIS WILL BE OUTLINED IN MMWR, BUT WILL MOST LIKELY DEPEND ON THE FOLLOWING:
  - AGE: PEOPLE OLDER THAN 40
  - HEALTH STATUS: POPULATIONS WITH IMMUNE DISEASES (IMMUNOCOMPROMISED, IMMUNE LIVER DISEASES)
  - EXPOSURE: RISK INDICATORS IN SEEN CONTACT VS. LOW-RISK PERSONS
  - AVAILABILITY OF IG
UPDATED HEPATITIS A RECOMMENDATIONS

The MMWR has not yet been published to reflect these recommendations but once it has been released it will be sent out by the immunization program.

Q12: HIB VACCINE FOR HIGH RISK ADULTS

Pam has recently had a splenectomy. She is here for her post surgical consult and to begin vaccination. Her recommendations include Hib vaccine. Is this correct? If so, what should I give her?

- A) Yes. Give pediatric Hib vaccine.
- B) Yes, but you must administer two doses consecutively.
- C) No. There is never an adult indication for Hib vaccine.
- D) No. The recommendation should be for Hepatitis B vaccine.
PAM HAS RECENTLY HAD A SPLENECTOMY. SHE IS HERE FOR HER POST SURGICAL CONSULT AND TO BEGIN VACCINATION. HER RECOMMENDATIONS INCLUDE HIB VACCINE. IS THIS CORRECT? IF SO, WHAT SHOULD I GIVE HER?

- A) YES. GIVE PEDIATRIC HIB VACCINE.
- B) YES, BUT YOU MUST ADMINISTER TWO DOSES CONSECUTIVELY.
- C) NO. THERE IS NEVER AN ADULT INDICATION FOR HIB VACCINE.
- D) NO. THE RECOMMENDATION SHOULD BE FOR HEPATITIS B VACCINE.

Q13: SINGLE DOSE VACCINE ORDERING
THE FOLLOWING VACCINES CAN BE ORDERED IN ONE DOSE INCREMENTS:

- A) MEN B, HEP B, HPV AND TD
- B) TDAP, HPV, VARICELLA AND MCV4
- C) PPSV23, PCV13, MEN B AND TD
- D) MEN B, PPSV23, TD AND DT
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- A) MEN B, HEP B, HPV AND TD
- B) TDAP, HPV, VARICELLA AND MCV4
- C) PPSV23, PCV13, MEN B AND TD
- D) MEN B, PPSV23, TD AND DT

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POST-TEST

Nurses interested in continuing education credit, visit
Successfully complete the five-question post-test to receive your certificate
Credit for this session available until June 12, 2018
This presentation will be posted to our website: www.ndhealth.gov/immunize