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## MEMO

**TO:** Prevention Partnership Providers and  
Local Public Health Units

**FROM:** Tatia Hardy  
Vaccines for Children/AFIX Coordinator

**RE:** 2010 – 2011 State-Supplied Seasonal Influenza Vaccine

**DATE:** August 12, 2010

The North Dakota Department of Health (NDDoH) Immunization Program is supplying seasonal influenza vaccine for the 2010-2011 season to providers for use in **only** those children who are **Vaccines for Children (VFC) eligible**. This includes children 18 years and younger who are either Medicaid-eligible, American Indian, uninsured or underinsured. Influenza vaccine is also being supplied for insured children to some local public health units who are participating in the school-located influenza vaccination pilot project.

The Advisory Committee on Immunization Practices (ACIP) recommends that all children, including healthy children, ages 6 months – 18 years be adequately immunized against influenza. **Therefore, state-supplied influenza vaccine may be administered to any child age 6 months – 18 years who is VFC-eligible.** Attached for your reference is a 2010 – 2011 Childhood Influenza Vaccine Dosage Chart. This chart is also available at [www.ndhealth.gov/immunize/documents/providers/forms/influenzaalgorithm.pdf](http://www.ndhealth.gov/immunize/documents/providers/forms/influenzaalgorithm.pdf).

Providers were asked to pre-book state-supplied influenza vaccine in March. **Providers must use private influenza vaccine to vaccinate insured children.**

State-supplied influenza vaccine will be distributed by McKesson. Influenza vaccine will be distributed in multiple shipments throughout the beginning of the influenza season. Providers can expect their first shipments of state-supplied influenza vaccine in late August. Providers may begin vaccinating patients immediately upon receiving the vaccine.

**According to North Dakota Century Code, 23-01-05.3, all childhood immunizations must be entered into the North Dakota Immunization Information System (NDIIS). This law includes influenza vaccine.**

August 12, 2010

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Important reminders about influenza vaccination:

- The 2010-2011 trivalent vaccine virus strains are A/California/7/2009 (H1N1)-like, A/Perth/16/2009 (H3N2)-like and B/Brisbane 60/2008-like antigens. The influenza A (H1N1) vaccine virus is derived from a 2009 pandemic influenza A (H1N1) virus.
- Live attenuated influenza vaccine (LAIV, Flumist®) can be used when vaccinating healthy people ages 2 – 49 years.
- Trivalent inactivated influenza vaccine (TIV) can be used to vaccinate people ages 6 months and older.
- Children ages 6 months – 8 years should receive 2 doses of influenza vaccine if they have not been previously vaccinated at any time with either LAIV or TIV. Two doses are required for protection in these children.
  - Children ages 6 months – 8 years who received only 1 dose in their first year of vaccination should receive 2 doses the following year.
  - The minimum interval between doses of either LAIV or TIV is four weeks.
- **Children ages 6 months – 8 years who did not receive at least one dose of the 2009 H1N1 influenza vaccine should receive 2 doses of the 2010-2011 seasonal influenza vaccine, regardless of their seasonal influenza vaccination history.**
- The NDDoH Immunization Program has developed an influenza vaccination algorithm to assist providers in determining the number of recommended doses children younger than 9 should receive. This algorithm is enclosed and is also available on our website at the following link: [www.ndhealth.gov/immunize/documents/providers/forms/influenzaalgorithm.pdf](http://www.ndhealth.gov/immunize/documents/providers/forms/influenzaalgorithm.pdf).

The updated 2010-2011 Vaccine Information Statements (VIS) are attached and also are available at the following links: [www.cdc.gov/vaccines/pubs/vis/downloads/vis-flulive.pdf](http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flulive.pdf) (LAIV) and [www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf](http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf) (TIV).

During the 2010-2011 influenza season, MedImmune will be offering replacement of all unused, expiring FluMist® doses at no cost. This program applies to doses that expire on or before January 31, 2011. Attached you will find the instructions for the FluMist® Replacement Program.

For more information about influenza vaccine recommendations visit: [www.cdc.gov/mmwr/preview/mmwrhtml/rr5908a1.htm?s\\_cid=rr5908a1\\_e](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5908a1.htm?s_cid=rr5908a1_e).

For information about influenza surveillance in North Dakota or to order influenza educational materials, visit [www.ndflu.com](http://www.ndflu.com).

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.

cc: Dr. Kent C. Martin, Medical Director  
Kirby Kruger, Medical Services Chief  
Molly Sander, Immunization Program Manager  
Teri Arso, Administrative Assistant

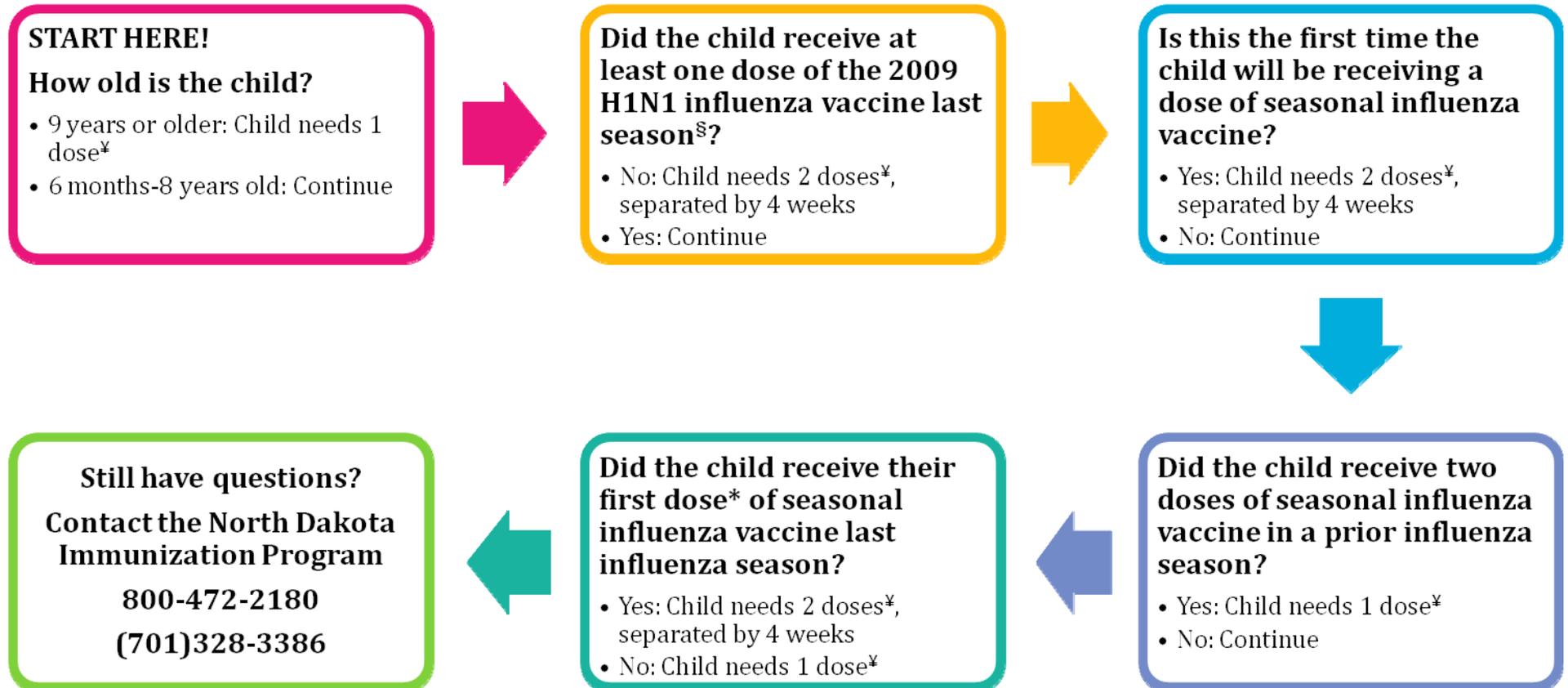


# 2010-2011 Childhood Influenza Vaccine Dosage Chart

Vaccine	Age	Dosage
<b>Fluzone®</b> (sanofi pasteur) Preservative Free 0.25 mL prefilled syringe	6 – 35 months	0.25 mL
<b>Fluzone®</b> (sanofi pasteur) Multi-dose vials	6 – 35 months	0.25 mL
	3 – 18 years	0.5 mL
<b>Fluzone®</b> (sanofi pasteur) Preservative Free 0.5 mL vial and prefilled syringe	3 – 18 years	0.5 mL
<b>Fluvirin®</b> (Novartis) 0.5 mL vial and multi-dose vials	4 – 18 years	0.5 mL
<b>Afluria®</b> (CSL) Multi-dose vial	9 – 18 years*	0.5 mL
<b>FluMist®</b> (MedImmune) Preservative Free 0.2 mL Sprayer	2 – 18 years	0.2 mL (0.1 mL per nostril)

\*If no other age-appropriate, licensed inactivated seasonal influenza vaccine is available for a child aged 5 years through 8 years old who has a medical condition that increases their risk for influenza complications, providers may use Afluria®. However, providers should discuss the benefits and risks of influenza vaccination with the parents or caregivers before administering Afluria®.

# 2010-2011 Influenza Vaccination Algorithm



<sup>¥</sup>2010-2011 seasonal influenza vaccine

<sup>§</sup>If the influenza vaccination history is unknown, the child needs two doses of seasonal influenza vaccine, separated by four weeks.

\*Children should receive two doses of seasonal influenza vaccine the **FIRST** time they are vaccinated. If they do not receive a second dose during that same season, two doses should be given in the following influenza season. If they are not completely vaccinated in that influenza season, the child should only get one dose per year from that point on.

Healthy children older than 2 may receive either live attenuated influenza vaccine (LAIV) or the trivalent inactivated vaccine (TIV).

# INACTIVATED INFLUENZA VACCINE

## WHAT YOU NEED TO KNOW 2010-11

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)  
Hojas de Información Sobre Vacunas están disponibles en Español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

### 1 Why get vaccinated?

**Influenza (“flu”) is a contagious disease.**

It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions.

Anyone can get influenza, but rates of infection are highest among children. For most people, symptoms last only a few days. They include:

- fever
- sore throat
- chills
- fatigue
- cough
- headache
- muscle aches

Other illnesses can have the same symptoms and are often mistaken for influenza.

Infants, the elderly, pregnant women, and people with certain health conditions – such as heart, lung or kidney disease or a weakened immune system – can get much sicker. Flu can cause high fever and pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. Each year thousands of people die from seasonal influenza and even more require hospitalization.

By getting vaccinated you can protect yourself from influenza and may also avoid spreading influenza to others.

### 2 Inactivated influenza vaccine

There are two types of influenza vaccine:

1. **Inactivated** (killed) vaccine, or the “flu shot” is given by injection into the muscle.
2. **Live, attenuated** (weakened) influenza vaccine is sprayed into the nostrils. *This vaccine is described in a separate Vaccine Information Statement.*

A “high-dose” inactivated influenza vaccine is available for people 65 years of age and older. Ask your healthcare provider for more information.

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year.

The 2010-2011 vaccine provides protection against A/H1N1 (pandemic) influenza and two other influenza viruses – influenza A/H3N2 and influenza B. It will not prevent illness caused by other viruses.

It takes up to 2 weeks for protection to develop after the shot. Protection lasts about a year.

Some inactivated influenza vaccine contains a preservative called thimerosal. Thimerosal-free influenza vaccine is available. Ask your healthcare provider for more information.

### 3 Who should get inactivated influenza vaccine and when?

#### WHO

All people **6 months of age and older** should get flu vaccine.

Vaccination is especially important for people at higher risk of severe influenza and their close contacts, including healthcare personnel and close contacts of children younger than 6 months.

People who got the 2009 H1N1 (pandemic) influenza vaccine, or had pandemic flu in 2009, should still get the 2010-2011 seasonal influenza vaccine.

#### WHEN

Getting the vaccine as soon as it is available will provide protection if the flu season comes early. You can get the vaccine as long as illness is occurring in your community.

Influenza can occur at any time, but most influenza occurs from November through May. In recent seasons, most infections have occurred in January and February. Getting vaccinated in December, or even later, will still be beneficial in most years.

Adults and older children need one dose of influenza vaccine each year. But some children younger than 9 years of age need two doses to be protected. Ask your healthcare provider.

Influenza vaccine may be given at the same time as other vaccines, including pneumococcal vaccine.

### 4 Some people should not get inactivated influenza vaccine or should wait

- Tell your healthcare provider if you have any **severe** (life-threatening) allergies. Allergic reactions to influenza vaccine are rare.

- Influenza vaccine virus is grown in eggs. People with a **severe egg allergy** should not get influenza vaccine.
- A severe allergy to any vaccine component is also a reason not to get the vaccine.
- If you ever had a severe reaction after a dose of influenza vaccine, tell your healthcare provider.

- Tell your healthcare provider if you ever had Guillain-Barré Syndrome (a severe paralytic illness, also called GBS). Your provider will help you decide whether the vaccine is recommended for you.
- People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If you are ill, talk to your healthcare provider about whether to reschedule the vaccination. People with a mild illness can usually get the vaccine.

## 5 What are the risks from inactivated influenza vaccine?

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

Serious problems from inactivated influenza vaccine are very rare. The viruses in inactivated influenza vaccine have been killed, so you cannot get influenza from the vaccine.

### Mild problems:

- soreness, redness, or swelling where the shot was given
- hoarseness; sore, red or itchy eyes; cough
- fever • aches

If these problems occur, they usually begin soon after the shot and last 1-2 days.

### Severe problems:

- Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the shot.
- In 1976, a type of inactivated influenza (swine flu) vaccine was associated with Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS. However, if there is a risk of GBS from current flu vaccines, it would be no more than 1 or 2 cases per million people vaccinated. This is much lower than the risk of severe influenza, which can be prevented by vaccination.

One brand of inactivated flu vaccine, called Afluria, **should not be given** to children 8 years of age or younger, except in special circumstances. A related vaccine was associated with fevers and fever-related seizures in young children in Australia. Ask your healthcare provider for more information.

The safety of vaccines is always being monitored. For more information, visit:  
[www.cdc.gov/vaccinesafety/Vaccine\\_Monitoring/Index.html](http://www.cdc.gov/vaccinesafety/Vaccine_Monitoring/Index.html)  
 and  
[www.cdc.gov/vaccinesafety/Activities/Activities\\_Index.html](http://www.cdc.gov/vaccinesafety/Activities/Activities_Index.html)

## 6 What if there is a severe reaction?

### What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe 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** the doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your healthcare 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.*

## 7 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) was created in 1986.

People who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382**, or visiting the VICP website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation).

## 8 How can I learn more?

- Ask your healthcare 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)** or
  - Visit CDC's website at [www.cdc.gov/flu](http://www.cdc.gov/flu)



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



Vaccine Information Statement (Interim)  
 Inactivated Influenza Vaccine (8/10/10) 42 U.S.C. §300aa-26

# LIVE, INTRANASAL INFLUENZA VACCINE

## WHAT YOU NEED TO KNOW 2010-11

Vaccine Information Statements are available in Spanish and many other languages. See [www.immunize.org/vis](http://www.immunize.org/vis)  
Hojas de Información Sobre Vacunas están disponibles en Español y en muchos otros idiomas. Visite [www.immunize.org/vis](http://www.immunize.org/vis)

### 1 Why get vaccinated?

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It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions.

Anyone can get influenza, but rates of infection are highest among children. For most people, symptoms lasts only a few days. They include:

- fever
- sore throat
- chills
- fatigue
- cough
- headache
- muscle aches

Other illnesses can have the same symptoms and are often mistaken for influenza.

Infants, the elderly, pregnant women, and people with certain health conditions – such as heart, lung or kidney disease or a weakened immune system – can get much sicker. Influenza can cause high fever and pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. Each year thousands of people die from seasonal influenza and even more require hospitalization.

By getting vaccinated you can protect yourself from influenza and may also avoid spreading influenza to others.

### 2 Live, attenuated influenza vaccine - LAIV (nasal spray)

There are two types of influenza vaccine:

1. **Live, attenuated** influenza vaccine (LAIV) contains live but attenuated (weakened) influenza virus. It is sprayed into the nostrils.
2. **Inactivated** (killed) influenza vaccine, or the “flu shot,” is given by injection into the muscle. *This vaccine is described in a separate Vaccine Information Statement.*

Influenza viruses are always changing, so annual vaccination is recommended. Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year.

The 2010 – 2011 vaccine provides protection against A/H1N1 (pandemic) influenza and two other influenza viruses– influenza A/H3N2 and influenza B. It will not prevent illness caused by other viruses.

It takes up to 2 weeks for protection to develop after the vaccination. Protection lasts about a year.

LAIV does not contain thimerosal or other preservatives.

### 3 Who can receive LAIV?

LAIV is recommended for healthy people **2 through 49 years of age**, who are not pregnant and do not have certain health conditions (see #4, below).

People who got the 2009 H1N1 (pandemic) influenza vaccine, or had pandemic flu in 2009, should still get the 2010-2011 seasonal influenza vaccine.

### 4 Some people should not receive LAIV

LAIV is not recommended for everyone. The following people should get the inactivated vaccine (flu shot) instead:

- **Adults 50 years of age and older or children from 6 through 23 months of age.** (Children younger than 6 months should not get either influenza vaccine.)
  - Children younger than 5 years with asthma or one or more episodes of wheezing within the past year.
  - Pregnant women.
  - People who have long-term health problems with:
    - heart disease
    - kidney or liver disease
    - lung disease
    - metabolic disease, such as diabetes
    - asthma
    - anemia, and other blood disorders
  - Anyone with certain muscle or nerve disorders (such as seizure disorders or cerebral palsy) that can lead to breathing or swallowing problems.
  - Anyone with a weakened immune system.
  - Anyone in close contact with someone whose immune system is so weak they require care in a protected environment (such as a bone marrow transplant unit). *Close contacts of other people with a weakened immune system (such as those with HIV) may receive LAIV. Healthcare personnel in neonatal intensive care units or oncology clinics may receive LAIV.*
  - Children or adolescents on long-term aspirin treatment.
- Tell your healthcare provider if you have any severe (life-threatening) allergies. Allergic reactions to influenza vaccine are rare.
- Influenza vaccine virus is grown in eggs. People with a **severe egg allergy** should not get influenza vaccine.
  - A severe allergy to any vaccine component is also a reason not to get the vaccine.
  - If you ever had a severe reaction after a dose of influenza vaccine, tell your healthcare provider.

Tell your healthcare provider if you ever had Guillain-Barré Syndrome (a severe paralytic illness, also called GBS). Your provider will help you decide whether the vaccine is recommended for you.

Tell your healthcare provider if you have gotten any other vaccines in the past 4 weeks.

Anyone with a nasal condition serious enough to make breathing difficult, such as a very stuffy nose, should get the flu shot instead.

People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If you are ill, talk to your healthcare provider about whether to reschedule the vaccination. People with a mild illness can usually get the vaccine.

## 5 When should I receive influenza vaccine?

Getting the vaccine as soon as it is available will provide protection if the flu season comes early. You can get the vaccine as long as illness is occurring in your community.

Influenza can occur any time, but most influenza occurs from November through May. In recent seasons, most infections have occurred in January and February. Getting vaccinated in December, or even later, will still be beneficial in most years.

Adults and older children need one dose of influenza vaccine each year. But some children younger than 9 years of age need two doses to be protected. Ask your healthcare provider.

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

## 6 What are the risks from LAIV?

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

Live influenza vaccine viruses very rarely spread from person to person. Even if they do, they are not likely to cause illness.

LAIV is made from weakened virus and does not cause influenza. The vaccine can cause mild symptoms in people who get it (see below).

### Mild problems:

Some children and adolescents 2-17 years of age have reported:

- runny nose, nasal congestion or cough
- fever
- headache and muscle aches
- wheezing
- abdominal pain or occasional vomiting or diarrhea

Some adults 18-49 years of age have reported:

- runny nose or nasal congestion
- sore throat
- cough, chills, tiredness/weakness
- headache

### Severe problems:

- Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the vaccination.

- If rare reactions occur with any product, they may not be identified until thousands, or millions, of people have used it. Millions of doses of LAIV have been distributed since it was licensed, and the vaccine has not been associated with any serious problems.

The safety of vaccines is always being monitored. For more information, visit:

[www.cdc.gov/vaccinesafety/Vaccine\\_Monitoring/Index.html](http://www.cdc.gov/vaccinesafety/Vaccine_Monitoring/Index.html)  
and

[www.cdc.gov/vaccinesafety/Activities/Activities\\_Index.html](http://www.cdc.gov/vaccinesafety/Activities/Activities_Index.html)

## 7 What if there is a severe reaction?

### What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe 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** the doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your healthcare 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.*

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



Vaccine Information Statement (Interim)  
Live, Attenuated Influenza Vaccine (8/10/10) U.S.C. §300aa-26



TO: Immunization Provider or Grantee

RE: FluMist® 2010-2011 Replacement Program

This letter is to inform you of the FluMist® Replacement Program for product purchased through the CDC contract for the 2010-2011 season (“Replacement Program”). The Replacement Program allows for the replacement of unused, expiring FluMist doses, at no cost, to help you maximize product usage opportunities. MedImmune has contracted with McKesson Specialty Distribution for implementation of this replacement program. This contract is between MedImmune and McKesson and is separate from CDC’s contract for centralized product distribution. The Replacement Program requirements are listed below:

- FluMist doses must be purchased through the CDC contract and must expire between August 2010 and January 31, 2011 to be eligible for the Replacement Program.
- Product must be used on a first-to-expire, first-used basis to be eligible for the Replacement Program.
- Providers or Grantees have from 15 days prior to the expiration date stamped on the sprayer until January 31, 2011 to request replacement doses.
- Requests for replacement doses by Providers or Grantees will be accepted until close of business (EST) on January 31, 2011. Requests for replacement doses after this date will not be honored. All requests should be placed with McKesson Specialty by calling 1-877-633-7375.
- All expired/expiring doses must be received by McKesson by Friday, February 18, 2011. Replacement product will not be shipped until expired/expiring doses are received.
- Replacement Request Rounding:
  - All requests for replacement doses must be in multiples of 10 units of product. Requests not in multiples of 10 will be rounded down to the nearest multiple of 10. Rounding up is prohibited. This requires a new order.
  - There will be no credit for doses returned in excess of those shipped for replacement.

The process to request replacement product is outlined below:

- 1) Call McKesson Specialty’s CDC Replacement Request line at 1-877-633-7375.
- 2) McKesson Specialty will instruct Providers or Grantees on date and time of pickup. Providers or Grantees are to box up FluMist and have it ready for the scheduled pick-up day. FluMist does not have to be returned cold.
- 3) McKesson Specialty will provide a Return Authorization Form to the Providers or Grantees.
- 4) Providers or Grantees are to place copy of the Return Authorization Form in the mailing container with the FluMist. **Note: FluMist returned without the form will not be replaced.**
- 5) Within 3 business days from receipt of request and verification of information, Federal Express will pick up the boxed FluMist from your location at no charge to the Providers.
- 6) Upon receipt and verification of the expiring/expired doses with the replacement request form, replacement doses will be shipped at no charge to you.

If you have any questions regarding the Replacement Program, please call 1-877-633-7375.