



Memo to Physicians, Nurses and Pharmacists RE: Influenza Vaccines

To: Physicians
Pharmacists authorized to provide influenza vaccine to NLPDP recipients
Nurse Practitioners, Regional Nurses

From: Dr. Claudia Sarbu, Chief Medical Officer of Health (Acting)

Date: October 3, 2018

Re: **Publicly-funded Seasonal Influenza Vaccine 2018 - 2019**

Plans are now well underway for the annual seasonal influenza immunization program. Vaccine for the publically funded program will soon be available for distribution to community-based physician's offices, community health nursing clinics, pharmacies, health facilities and Regional Health Authority (RHA) staff health offices.

Physicians and pharmacists may order publicly-funded vaccine through the regional public health offices as directed in this memo.

Pharmacist's scope of practice includes administration via intramuscular injection to persons 5 years of age and older. Publically funded vaccine will be provided to pharmacists to administer to beneficiaries of the Newfoundland and Labrador Pharmacy Drug Program (NLPDP) only. If pharmacists choose to provide influenza vaccine to non-NLPDP clients they will need to secure a private supply of influenza vaccine and charge the customer.

Recommended Recipients for Seasonal Influenza Immunization

The publically funded seasonal influenza vaccine program provides the vaccine free of charge to **all individuals 6 months of age and older**. Emphasis should be placed on immunizing those who are at increased risk for complications from influenza, and individuals such as health care providers capable of transmitting influenza to those at high risk.

Please refer to the appropriate influenza vaccine product monographs to note product-specific age indications, precautions and contraindications. Product monographs must be reviewed prior to administering any vaccine.

Vaccine Products for 2018-19

Quadrivalent influenza vaccines (QIV)

1. **FluLaval**, an inactivated vaccine, is the main product supplied by the Department of Health and Community Services (DHCS) and is available in multi-dose vials, 10 doses per vial. Administered by IM injection for all persons aged six months and older.

FluLaval Product monograph:
<http://ca.gsk.com/media/590283/flulaval-tetra.pdf>

DIN/Pharmacy rule # 02420783

2. **Fluzone**, an inactivated vaccine, is also available this year in multi-dose vials (10 doses per vial), as well as a limited supply of pre-filled syringes. Administered by IM injection for all persons aged six months and older.

Fluzone Product monograph:
https://pdf.hres.ca/dpd_pm/00045506.PDF

DIN/Pharmacy rule # 02432730

Adjuvanted Trivalent influenza vaccine (TIV) used for 2018-19

3. **Fluad**, an adjuvanted inactivated vaccine, will be offered only to residents of Long Term Care and Personal Care homes who are 65 years of age and older.

Fluad Product monograph:
https://pdf.hres.ca/dpd_pm/00047167.PDF

DIN/Pharmacy rule # 02362384

Administration of Influenza Vaccine to Egg Allergic Individuals:

The National Advisory Committee on Immunization (NACI) has concluded that egg allergic individuals may be vaccinated against influenza using inactivated TIV or QIV, without prior influenza vaccine skin test and with the full dose, irrespective of a past severe reaction to egg and without any particular consideration, including immunization setting.

Immunization of Children

Children 6 months to less than 9 years of age, receiving influenza vaccine for the first time, are recommended to receive 2 doses of vaccine spaced at least 4 weeks apart.

Adverse Events following Immunization

All Adverse Events Following Immunization (AEFIs) are to be reported to the Regional Medical Officer of Health. For details please refer to:
http://www.health.gov.nl.ca/health/publichealth/cdc/section_1_general_considerations_immunizations.pdf

AEFI form:

<https://www.canada.ca/content/dam/phac-aspc/documents/services/immunization/raefi-dmcisi-eng.pdf>

Vaccine Ordering Process

- The distribution and supply of vaccine will be monitored very closely through the Regional Health Authority (RHA). The amount of vaccine sent may not always be the full amount you have ordered. This will be dependent upon national supply and demand and measures in place to reduce wastage. It is imperative that you not overstock vaccine which could lead to vaccine wastage.
- Please contact Communicable Disease Control staff in the following areas to arrange for an order of influenza vaccine:

EASTERN HEALTH	
Mount Pearl Square Vaccine Depot Telephone: 752-4886 Fax: 752-4873	Holyrood Vaccine Depot Telephone: 229-1572 Fax: 229-1589
CENTRAL HEALTH	
Telephone: 651-6234 Fax: 256-4977	
WESTERN HEALTH	
Telephone: 784-5417 Fax: 637-5160	
LABRADOR GRENFELL HEALTH	
Telephone: 454-0375 Fax: 454-4978	

- Influenza vaccine must be ordered using the **Influenza Vaccine Order Form (Appendix A)** or a regional **Influenza Vaccine Order Form** supplied to you. **Please note that if you have not submitted your tally form for 2017-18 your influenza vaccine order will NOT be filled. Once the tallies have been received the order will be filled.**
- Fax the order form to the Communicable Disease Control Office in your region (as per contact information above). Contact them to make arrangements for pick/up delivery of the influenza vaccine.
- Vaccine temperature must be maintained between 2°C to 8°C at all times. You will require insulated coolers and sufficient supply of ice packs when picking up vaccine. Vaccine will not be released without proper cooling containers for transportation to your clinic

Record of Recipients of Influenza Vaccine 2018-2019 Tally Form (Appendix B)

- We are responsible for distributing, monitoring the uptake and monitoring the vaccine wastage, therefore we ask you to use the **TALLY FORM** provided in Appendix B or the one supplied to you by your regional contacts in CDC.
- The Tally Form **must** be submitted:
 - When requesting additional doses of vaccine; and
 - At the end of **each month** during the time that immunization is offered; and
 - Following administration of all doses of vaccine when the Influenza Immunization season is declared over.
- **Please note that if you have not submitted your tally form, your influenza vaccine order will NOT be filled.**
- All unused, partially used and expired vaccine must be accounted for and reported to the vaccine depot using the Biologics Preparation Return Form

Vaccine Storage and Cold Chain Monitoring

- All vaccine must be stored in the center of the refrigerator between **2 – 8°C**. Vaccine viability may be compromised if not stored properly. Please review the vaccine storage and handling guidelines and the product monograph supplied with the vaccine for additional information. Report all cold chain breaks (when the vaccine is exposed to less than 2°C or above 8°C) to regional Communicable Disease Control staff for further direction before using the exposed vaccine.

For more detail please refer to the NL Immunization manual:

http://www.health.gov.nl.ca/health/publichealth/cdc/im_section7_biological_products.pdf

Best Regards,



Dr. Claudia Sarbu MD, MSc, FRCPC
Chief Medical Officer of Health (Acting)

**Influenza immunization is recommended for all individuals
6 months of age and older and particularly
for these high risk groups:**

People at high risk of influenza-related complications or hospitalization:

- **All pregnant women.**
- **Adults and children with the following chronic health conditions:**
 - cardiac or pulmonary disorders (including bronchopulmonary dysplasia, cystic fibrosis & asthma);
 - diabetes mellitus and other metabolic diseases;
 - cancer, immune compromising conditions (due to underlying disease and/or therapy);
 - renal disease;
 - anemia or hemoglobinopathy;
 - neurologic or neurodevelopment conditions;
 - morbid obesity (BMI ≥ 40);
 - children and adolescents (age 6 months to 18 years) undergoing treatment for long periods with acetylsalicylic acid, because of the potential increase of Reye's syndrome associated with influenza.
- **People of any age who are residents of nursing homes and other chronic care facilities.**
- **People ≥ 60 years of age. (NL policy decision)**
- **All children 6 to 59 months of age (< 5 years of age).**
- **Indigenous Peoples**

People capable of transmitting influenza to those at high risk

- **Health care and other care providers in facilities and community settings who, through their activities, are capable of transmitting influenza to those at high risk of influenza complications.**
- **Household contacts (adults and children) of individuals at high risk of influenza-related complications (whether or not the individual at high risk has been immunized):**
 - household contacts of individuals at high risk, as listed in the section above;
 - household contacts of infants < 6 months of age as these infants are at high risk of complications from influenza but cannot receive influenza vaccine; and
 - members of a household expecting a newborn during the influenza season.
- **Those providing regular child care to children ≤ 59 months of age, whether in or out of the home.**
- **Those who provide services within closed or relatively closed settings to persons at high risk (e.g., crew on a ship).**

Others

- **People who provide essential community services.**
- **People in direct contact during culling operations with poultry infected with avian influenza**

References & Resources:

Literature:

National Advisory Committee on Immunization (NACI). *Statement on Seasonal Influenza Vaccine for 2018-19:*

<https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-statement-seasonal-influenza-vaccine-2018-2019.html>

Department of Health & Community Services Provincial Website:

http://www.health.gov.nl.ca/health/publichealth/cdc/infoforpros_edu.html

Additional information

1. Influenza Vaccine Order Form 2018-19 (see Appendix A)
2. Record of Recipients of Influenza Vaccine Tally Form 2018-2019 (see Appendix B)
3. Biologics Preparation Return Report Form will be provided with vaccine orders also on the website:
http://www.health.gov.nl.ca/health/publichealth/cdc/im_section7_biological_products.pdf

Appendix A: ORDER FORM

Physician/Pharmacist/NP: _____

Physician/Pharmacy/NP Address:

Physician/Pharmacy/NP Telephone: _____

Date Submitted: _____ Date Order Sent from RHA: _____

Pharmacy Board Registration Number (if applicable):: _____

Pharmacy: _____ NLPDP Billing Number (if applicable): _____

Product	Administration	Specific age group	Doses required	Doses sent from RHA
FluLaval	Injection	6 months and over		
Fluzone	Injection	6 months and over		
Fluad	Injection	Personal Care Home residents 65 years plus		

EASTERN HEALTH	
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CENTRAL HEALTH	
Telephone: 651-6234 Fax: 256-4977	
WESTERN HEALTH	
Telephone: 784-5417 Fax: 637-5160	
LABRADOR GRENFELL HEALTH	
Telephone: 454-0375 Fax: 454-4978	

Record of Recipients of Influenza Vaccine Tally Form 2018-2019 – FOR EMPLOYEES

Indicate the number of persons receiving vaccine in the age appropriate column.

Date Administered (MM/DD/YY)	Clinic Site	Vaccine Lot#	Age Group	Influenza Immunization Tally Form			
				Employee	Contracted Physician	Medical Residents/ Interns/Clerks	Other**
			9 -19 yrs				
			20-44 yrs				
			45-64 yrs				
			65+ yrs				
			9 -19 yrs				
			20-44 yrs				
			45-64 yrs				
			65+ yrs				

** Other = volunteers, health studies students, food services, catering, security who regularly work at your facilities

Immunizer: _____

Telephone: _____

Record of Recipients of Influenza Vaccine Tally Form 2018-2019

Indicate the number of persons receiving vaccine in the age appropriate column.

Date Administered (MM/DD/YY)	Clinic Site	Vaccine Lot#	Influenza Immunization Tally Form																
			6 months - 4 yrs			5 yrs - 8 yrs			9-19 yrs	20-44 yrs	45-64 yrs	65+ yrs							
			Only 1 dose required	1 st dose	2 nd dose	Only 1 dose required	1 st dose	2 nd dose											

Immunizer: _____

Telephone: _____