

Case Studies in Immunization Delivery

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Today's Talk

- Some Background Guidance to Decisions
- Cases/Discussions
- Immunization Jeopardy!!

Immunization Records

- A verbal history of previous immunizations is not sufficient evidence.
- Accept as valid only immunizations that are documented in writing and dated.

When in doubt, vaccinate!

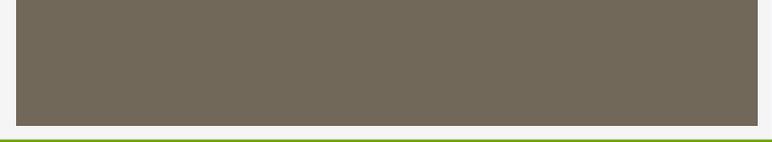
Vaccination During Acute Illness

- There is no evidence that acute illness reduces vaccine efficacy or increases vaccine adverse reactions.
- Mild illness, such as otitis media or an upper respiratory infection, is NOT a contraindication to vaccination.

No need to take temps!

Challenges to Effective Communication with Patients

- Finding the time to communicate
- The science of vaccines and immunology is complicated.
- Language barriers
- Information resources



One of the most important factors that influence a patient's decision to be vaccinated is a clear and unequivocal recommendation of the vaccine from the provider.

Protect yourself, your family and your patients!

All health care workers should get the flu vaccine every year! Are we up to date on all recommended adult vaccines?



<http://www2.cdc.gov/nip/adultimmsched>

Strategies to Reduce Myths and Misperceptions about Vaccines

- Take time to listen to the patient
- Validate concerns
- Use a “heart and head” approach
- Balance risks and benefits
- Be flexible
- Direct them to reliable resources
- <http://www.immunizeca.org>

Approaches to Vaccine Communication Challenges

- Keep your message simple
- Advise the patients what to expect after the vaccination
- Emphasize the return visits.

The County of San Bernardino Up-to-Date Assessments

- Immunization up-to-date rate assessments are conducted by Health Education Specialist based on the current ACIP recommended schedule in entirety.

The County of San Bernardino Up-to-Date Assessments

- What are your immunization rates?
- UTD Assessment increases awareness
- UTD Assessment identifies areas for improvement
- UTD Assessment leads to action

Cases

- Mostly no right answers
 - Often some wrong answers
- When no right answers... If in doubt, discuss with the family
- Ignore the Flu vaccine (until we get to the part where it's obvious I'm asking about it...)

Immunization Pearls

- Think about EACH antigen separately when dealing with combination vaccines.
 - I.E., Pentacel – think about DTaP, then IPV, then HIB.
- When looking at lists of shots, think about any vaccines that the patient hasn't received AT ALL.
 - It's much easier to notice that a patient is short a vaccine (I.E., only had one VZV), then it is to recognize they've never received a vaccine (I.E., never had Hep A)

Immunization Pearl

- It is not necessary to restart a documented vaccine series!!!

Case 1

- 12 month old patient presents for routine well child care visit. This patient is new to your practice and has no immunization records.
- What do you do?

Case 2

- 12 month old patient presents for routine well child care visit. This patient is new to your practice.
 - Brings immunization records
 - Patient is Up to Date (with the exception of the 12 month old shots)
 - No record of birth Hep B
- What do you do?

Case 3 – Today's Date 1/11/14

					Brian S.	
					DOB 1/11/12	
					Age 2.0 years	
	1	2	3	4	5	
Hep B	1/11/12	2/11/12				
Pentacel	3/11/12	5/11/12	7/11/12	1/11/13		
PCV – 13	3/11/12	5/11/12	7/11/112			
Rotovirus	3/11/112	5/11/12	7/11/12			
MMR	1/11/3					
Hep A	4/11/13	1/11/14				
DTaP	4/11/13					
HIB	4/11/13					

Case 4

- 16 month old patient presents for ringworm. This patient is known to your practice, and is NOT up to date with immunizations.
- What do you do?
 - If you vaccinate today will that decrease the chance that he/she will return for well child care?
 - Are there circumstances where you'd choose not to vaccinate?

Case 5

- 16 month old patient, presents for well child care visit. This patient is new to your practice and the family refuses vaccination.
- What do you do?

Case 6

- 12 month old patient presents for routine well child care visit. This patient is Up-to-Date with 3 sets of all shots (including Hep B).
 - The patient also has a fever to 100.9 and with OM
 - Parent tells you up front that they don't want shots today.
- What do you do?
- Is your approach different if the patient is NOT up-to-date and known to miss appointments?

Case 7

- 3 year old with Cerebral Palsy comes in for a routine visit today. She has had all of her routine shots through 3 years of age.
- Given that she has CP what additional shot(s) should you be advising?

Case 8

- 7 year old status post bone marrow transplant last year. Had previously received all appropriate vaccines.
- What do you do today?

YOUR Fault if Your Unvaccinated Child
Makes Someone Sick

New Influenza Patch Could Replace Needle Stick

Vaccine-Preventable Outbreaks

Immunization Jeopardy!

Questions?

