



Northern Health Physicians

Partners in Wellness

Public Health Newsletter for Northern Health Physicians

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Special Issue on Influenza 2018-19 Season

HIGHLIGHTS

Vaccine roll-out:

- ▶ Starting October 9, 2018: vaccine will be provided to Long Term Care (LTC) facilities for residents, and to NH Workplace Health & Safety (WH&S) for staff and physicians.
- ▶ Starting the week of October 22, 2018: distribution to physicians and other Community Vaccine Providers (CVPs) will commence. Vaccine will also be available to infants and toddlers through NH's Child Health Clinics (CHCs).
- ▶ Order your vaccines now!

Indications: While specific products have changed, the general categories with respect to who receives TIIV, QIIV or LAIV-Q have not changed since 2017/18. Remember that the intranasal vaccine (FLUMIST®) which is indicated for children aged 2-17 years of age is **no longer considered superior** to the injectable quadrivalent vaccine. Fluzone Quadrivalent (depending on availability) should be used for children 6-23 months of age and may be used for individuals 2-17 years of age. Fluviral and Influvac are the publicly-funded options that should be offered to individuals 18 years of age and older.

Eligibility for free/publicly covered vaccination:

- ▶ Seasonal influenza vaccination is covered for people at high risk, their close contacts, and people who live or work in high-risk settings (see p.3).
- ▶ One-time polysaccharide pneumococcal vaccine for people 65 or older or otherwise at high risk, plus one booster for certain very high-risk groups (see p.5).

Remember to report to your local health unit:

- ▶ Influenza vaccine administration to children up to 8 years old,
- ▶ All pneumococcal vaccine administration, and
- ▶ Any adverse events following immunization.

Order forms, reporting forms, and many more resources are available at: <https://www.northernhealth.ca/for-health-professionals/immunization-resources-tools>.

Read on for more details!

Don't forget to report your own immunization status at <https://medicalstaffhealth.phsa.ca/>.

Starting December 1, all physicians and staff are required to either be vaccinated or to wear a mask while in patient care areas in NH facilities.

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Notable Quotable:

Adopting the right attitude can convert a negative stress into a positive one.

Hans Selye

BrainyQuote

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2018-19 Seasonal Influenza: What You Need to Know

Introduction

The following pages contain information on influenza and pneumococcal vaccines to guide physicians, health care workers, and community vaccine providers on their use during the upcoming influenza season. For more information please see the references and resources at the end of this newsletter.

Immunization Campaign Start Date:

The official provincial campaign launch date for this season's influenza community campaign is **the week of October 29, 2018**. **Northern Health clinics will commence after this date.**

Vaccine Ordering, Distribution, Storage:

Vaccine Ordering:

Physicians and all other CVPs (pharmacists, nurses in First Nation communities, acute and residential care facilities and others) are required to fill out the Influenza Vaccine Order form when ordering Influenza and Pneumococcal vaccine this flu season. Your order for pneumococcal vaccine can be placed at the same time.

Please use the [Influenza Vaccine Order Form](#) which can also be found at the following link: <https://northernhealth.ca/Professionals/ImmunizationResourcesandTools.aspx>.

Please fax your order to the local Health Unit at the number identified on the form. After receipt of your vaccine order, influenza vaccines will be available for pick up starting the week October 23rd (date dependent on vaccine delivery to local health units).

Please note that due to the incremental arrival of vaccines, Northern Health may not be able to fill all orders completely at the onset. Northern Health will endeavor to ensure fair and equitable distribution to all community partners and fill your complete order in as few installments as possible.

Reporting

All Community Vaccine Providers must complete the [Influenza Vaccine Utilization Report](#). This form is used to track the number of doses given of each vaccine, and in each age group. This form is to be completed and returned/ faxed by CVPs to the appropriate [community specific health unit by January 31, 2019](#).

[Click here](#) to access Influenza Order forms.

Reminders about Vaccine Distribution and Storage:

- Call the Biological Product Monitor (BPM) at your local health unit to arrange your vaccine order pick up date.
- Please bring an appropriate sized cooler with cooled gel blankets and ice for vaccine pick up.
- Keep your biological fridge between 2-8 degrees.
- Notify the local BPM of any cold chain break incidents and report accordingly.
- Return all unused and partially used vials of publically funded vaccines to your BPM. Do not dispose.
- Influenza vaccine can continue to be offered until the BPMs send out a request for annual influenza vaccine return. This typically occurs in May.



2018-19 Seasonal Influenza: What You Need to Know

Eligibility:

Influenza vaccine is recommended for everybody >6 months of age and provided free to:

1. People at high risk:

- People aged 65 years and older
- People of any age who are residents of long-term care facilities
- Adults (including pregnant women) and children with the following chronic health conditions:
 - Cardiac or pulmonary disorders (e.g. bronchopulmonary dysplasia, cystic fibrosis, asthma)
 - Diabetes and other metabolic diseases
 - Cancer; immunodeficiency (including human immunodeficiency virus [HIV] infection); immunosuppression due to underlying disease or therapy (e.g., severe rheumatoid arthritis requiring immunosuppressive therapies)
 - Chronic kidney disease
 - Chronic liver disease, including hepatitis C
 - Anemia and hemoglobinopathy
 - Conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration (e.g., cognitive dysfunction, spinal cord injury, seizure disorder, and neuromuscular disorders)
- Children and adolescents (6 months to 18 years of age) with conditions treated for long periods with acetylsalicylic acid
- Children and adults who are morbidly obese (adult BMI ≥ 40 ; child BMI assessed as ≥ 95 th percentile adjusted for age and sex)
- Aboriginal peoples (on and off reserve)
- Healthy children 6 to 59 months of age
- Pregnant women at any stage of pregnancy during the influenza season (typically spanning November to April)
- Inmates of provincial correctional institutions
- People working with live poultry (Immunization may reduce the potential for human-avian re-assortment of genes should such workers become co-infected with human and avian influenza.)

2. People capable of transmitting influenza to those at high risk:

- All health care workers (including all health authority staff, accredited physicians and residents, volunteers, students, contractors, and vendors) who come into contact with patients at health care facilities including long-term care facilities. This includes independent health care practitioners and their staff in community settings.
- Visitors to health care facilities and other patient care locations
- Household contacts (including children) of people at high risk whether or not those high risk people have been immunized
- Those who provide care and/or service in potential outbreak settings housing high risk persons (e.g., crew on ships)
- Household contacts of healthy children 0 to 59 months of age
- Those providing regular child care to children 0 to 59 months of age, whether in or out of the home

3. People who provide essential community services:

- First responders: police, fire fighters, ambulance
- Corrections workers



2018-19 Seasonal Influenza: What You Need to Know

Intended Use of Influenza Vaccines:

The following table outlines BCCDC guidelines for intended use of influenza vaccine as of August 27, 2018 as reference for the 2018/19 Influenza immunization program. For the most current version of this table, please refer to the following link:

[Intended Use of Influenza Vaccines](#)

BC Centre for Disease Control
An agency of the Provincial Health Services Authority

Intended Use of Influenza Vaccines

The influenza biological product pages provide guidance on the use of influenza vaccines that are publicly-funded in BC for the 2018/19 season: FLUMIST® QUADRIVALENT, FLUZONE® QUADRIVALENT, FLUVIRAL® and INFLUVAC®.

The intended use of these vaccines by age group of recipient for the 2018/19 season is as follows:

Age Group	Vaccine	Comments
6-23 months of age	<ul style="list-style-type: none"> FLUZONE® QUADRIVALENT 	<ul style="list-style-type: none"> For children 6-23 months of age, FLUZONE® QUADRIVALENT is the recommended product. If FLUZONE® QUADRIVALENT is unavailable, FLUVIRAL® should be used.
2-17 years of age	<ul style="list-style-type: none"> FLUZONE® QUADRIVALENT FLUMIST® QUADRIVALENT 	<ul style="list-style-type: none"> If a quadrivalent product is unavailable, FLUVIRAL® or INFLUVAC® should be used. INFLUVAC® is approved for those 3 years of age and older.
18 years of age and older	<ul style="list-style-type: none"> FLUVIRAL® INFLUVAC® 	<ul style="list-style-type: none"> INFLUVAC® is a single dose thimerosal-free product and should be used for individuals with a known hypersensitivity to thimerosal. In the event of a surplus of FLUZONE® QUADRIVALENT in the provider's inventory beyond that required for those under 18 years old, this vaccine may be provided to those 18 years of age and older.

For more information on other influenza vaccines available in Canada, please refer to the product monograph and the [NACI Statement on Seasonal Influenza Vaccine for 2018-2019](#). Non-publicly funded influenza vaccines can be purchased at local pharmacies and travel clinics.

As it is expected that FLUZONE® High-Dose will be marketed to seniors in BC, BCCDC has produced a [FLUZONE® High-Dose Influenza Vaccine Question & Answer](#) document for health care providers



2018-19 Seasonal Influenza: What You Need to Know

Vaccines and Recommended Usage

Influenza vaccine is safe and well-tolerated and may be given to persons starting from six months of age (noting-specific age indications and contraindications).

Four publicly-funded vaccine products will be distributed in Northern Health this influenza season. These products reflect the following World Health Organization recommended composition of influenza virus vaccines for use in the northern hemisphere during the 2018-2019 influenza season:

- **A/Michigan/45/2015 (H1N1)pdm09-like virus**
- **A/Singapore/INFIMH-16-0019/2016 (H3N2)-like virus**
- **B/Phuket/3073/2013-like virus (in quadrivalent vaccines only)**
- **B/Colorado/06/2017-like virus**

The A/Singapore and B/Colorado strains were not contained in the 2017/18 season vaccine.

Note: Fluzone High-Dose is a private pay option for seniors, recommended by NACI, and can be purchased without prescription at select pharmacies. It is not publicly covered in BC as the incremental benefit is very small.

Vaccine	FLUVIRAL®	INFLUVAC®	FLUZONE®	FLUMIST®
Description	Inactivated Split Virion (TIIV) (IM) from GlaxoSmithKline Inc.	Inactivated Subunit (TIIV) (IM) From Mylan Pharmaceuticals ULC	Inactivated Split Virion (QIIV) (IM) from Sanofi Pasteur Limited	Live, attenuated (LAIV-Q) (Intranasal) from AstraZenaca Canada
Presentation	10 doses per vial without syringes	Single dose syringe	10 doses per vial without syringes	Box with 10 applicators
Client Age Group	Intended for use in eligible individuals 18 years of age or older.	Intended for use in eligible individuals 3 years of age or older. NOTE: The vaccine is not approved for use in those less than 3 years of age.	Intended for use in eligible children 6 months to 17 years of age (inclusive) including those with contraindications to LAIV-Q.	Intended for use in eligible individuals 2-17 years or age (inclusive)
Shelf-life, once opened	Multi-dose vial Discard multi-dose vials 28 days after first entry	n/a single dose	A multi-dose vial that has been stored at 2-8 degrees C may be used up to the expiry date indicated on the vial label.	n/a single dose
Other considerations**	May be used in children 6 months to 17 years of age if a quadrivalent vaccine is unavailable	Use for individuals with a known hypersensitivity to thimerosal May be used in children 3-17 years of age if a quadrivalent influenza vaccine is unavailable	In the event of vaccine surplus in the provider's inventory beyond that required for those under 18 years old, this vaccine may be provided to those 18 years of age and older as part of the publicly funded program in BC.	
	*contains thimerosal	*contains gentamicin	*contains thimerosal	*contains gentamicin

**See product monographs for additional details on contraindications and precautions.

Complete details on 2018/19 Seasonal Influenza Vaccines is available at BC Centre for Disease Control, Communicable Disease Control Manual, Chapter 2, Immunization Program, Part 4-Biological Products at: <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/immunization>



2018-19 Seasonal Influenza: What You Need to Know

Pneumococcal Vaccine

Polysaccharide Pneumococcal Vaccine

Secondary pneumococcal infections add to the morbidity from seasonal influenza viruses. Polysaccharide pneumococcal vaccine is recommended and provided free for:

- Adults 65 years of age and older
- Residents of extended or intermediate care facilities
- Individuals 2 years of age and older with:
 - **Anatomic or functional asplenia**
 - **Sickle cell disease**
 - **Immunosuppression related to disease (e.g., malignant neoplasm (including leukemia and lymphoma), HIV, multiple myeloma) or therapy (e.g., high dose, systemic steroids, or severe rheumatoid arthritis requiring immunosuppressive therapy)**
 - **Congenital immunodeficiency states (e.g. complement, properdin, or factor D deficiency)**
 - **Chronic heart or lung disease (except asthma, unless management involves ongoing high dose oral corticosteroid treatment.**
 - **Chronic kidney disease**
 - **Chronic liver disease including cirrhosis, chronic hepatitis B, hepatitis C.**
 - **Receipt of hematopoietic stem cell transplant (HSCT)**
 - **Solid organ or islet cell transplant (candidate or recipient)**
 - Diabetes
 - Alcoholism
 - Cystic fibrosis
 - Chronic CSF leak
 - Cochlear implant (candidate or recipient)
 - Homelessness and/or illicit drug use
 - Chronic neurological conditions that may impair clearance of oral secretions¹

Booster Doses

A once-only revaccination should be offered at least 5 years after the initial immunization to those who have:

- Anatomic or functional asplenia
- Sickle cell disease

- Immunosuppression related to disease (e.g., HIV, lymphoma, Hodgkin's, multiple myeloma) or therapy (e.g., high dose, systemic steroids)
- Congenital immunodeficiency states (as above)
- Chronic kidney disease
- Chronic liver disease including cirrhosis, chronic hepatitis B, and hepatitis C
- HSCT recipients: [see Part 2 – Immunization of Special Populations, Hematopoietic Stem Cell Transplantation \(HSCT\).](#)

Revaccination with pneumococcal vaccine (a booster dose) is not routinely recommended for clients who do not meet one of the above criteria.

We encourage physicians and other CVPs to identify patients who are eligible for pneumococcal vaccine, and administer pneumococcal vaccine if not already done.

Pneumococcal vaccine can be given at the same time as the seasonal influenza vaccine, using separate syringes/needles at separate sites.

Complete details on the Pneumococcal Polysaccharide vaccine is available in the BC Centre for Disease Control, Communicable Disease Control Manual, Chapter 2, Immunization Program, [Part 4-Biological Products](#) at: <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-disease-control-manual/immunization/>

Reporting Requirements:

Adverse Reactions following Immunization (AEFI):

All significant and unexpected adverse events following immunization with any vaccine product are to be reported to the local health unit. Medical Health Officer recommendations for future immunizations will be sent to the immunizer.

The reporting form for AEFIs is available at: <http://www.bccdc.ca/health-professionals/professional-resources/surveillance-forms>.

For more information on Adverse Events following immunization please visit: [http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%](http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%20-%20-%20Imms/Part%205%20AEFI.pdf)

[20Manual/Chapter%20-%20-%20Imms/Part 5 AEFI.pdf](#)

Reporting of Vaccine Administered:

Community vaccine providers are required to report the following vaccines administered:

- All clients receiving the Pneumococcal Vaccine
- Children 8 years and younger who receive the influenza vaccine

This ensures Public Health records are up to date and avoids unnecessary doses of vaccine.

The [Immunization Influenza Vaccine and Pneumococcal reporting form](#) can be found at: <https://northernhealth.ca/Professionals/ImmunizationResourcesandTools.aspx>

Influenza testing and treatment:

Influenza-like illness (ILI) is defined as: fever **and** cough **and** at least one of: headache, myalgia, arthralgia, extreme fatigue/weakness, sore throat.

Testing:

For non-severe cases of ILI in the community, testing cases of influenza-like illness (ILI)* for influenza does not alter clinical management, and is not necessary.

Influenza testing, by nasopharyngeal swab, is indicated:

- for severe or unusual cases (e.g. patients requiring hospitalization), and
- among patients in acute care facilities and residents of long-term care facilities (where there is potential for an outbreak).

Empiric treatment: During influenza season, antiviral treatment (oseltamivir or zanamivir) is recommended for patients at high risk of complications presenting with influenza-like illness (ILI), without waiting for a lab result.

Oseltamivir or zanamivir reduces the risk of complications of influenza when started within 48 hours of the onset of symptoms for most patients, or within 96 hours of symptom onset for severely ill patients requiring hospitalization. Greater benefits occur when antivirals are initiated as soon as possible.

(Continued on page 7)



2018-19 Seasonal Influenza: What You Need to Know

(Continued from page 6)

Patients at high risk of complications are largely the same as those who are eligible for free vaccine:

- Patients with chronic medical conditions
- Residents of long-term care facilities
- Individuals 65 years of age or older
- Indigenous people
- Pregnant women and women up to 4 weeks post-partum, regardless of how the pregnancy ended.

Recommended treatment regimens for adults with normal renal function are:

- Oseltamivir 75mg twice daily x 5 days, or
- Zanamivir 10mg (two 5 mg inhalations) twice daily x 5 days

For children, treatment is based on weight. See AMMI guidelines for details.

Chemoprophylaxis: is indicated among inpatients/residents in health care facilities during influenza outbreaks declared by the Medical Health Officer. Physicians who provide care in residential care facilities are asked to **pre-sign the standard antiviral order set**, so that it is ready to go in the event of an outbreak.

For more information on antiviral use, see:

<https://www.ammi.ca/Content/Guidelines/Flu%20%28published%20version%29%20FINAL.pdf>

References:

- BCCDC Communicable Disease Guidelines at <http://www.bccdc.ca/dis-cond/commmanual/CDManualChap2.htm>
- Recommended composition of influenza virus vaccines for use in the 2018-2019 northern hemisphere influenza season: [WHO | Recommended composition of influenza virus vaccines for use in the 2018-2019 northern hemisphere influenza season](http://www.who.int/publications/m/item/recommended-composition-of-influenza-virus-vaccines-for-use-in-the-2018-2019-northern-hemisphere-influenza-season)

Flu Watch: <http://www.phac-aspc.gc.ca/fluwatch/>

Additional Resources:

- Northern Health Influenza information is available at: <https://www.northernhealth.ca/health-topics/flu>
- The National Advisory Committee on Immunization (NACI) "Statement on Seasonal Influenza vaccine for 2018-2019 available at: <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-statement-seasonal-influenza-vaccine-2018-2019.html>
- HealthLinkBC - Health Files: <https://www.healthlinkbc.ca/services-and-resources/>

[healthlinkbc-files](#) or

1. [Facts about Influenza \(The Flu\) \(12b\)](#)
 2. [Inactivated Influenza Vaccine \(12d\)](#)
 3. [Influenza \(Flu\) Immunization: Myths and Facts \(12c\)](#)
 4. [Pneumococcal Polysaccharide Vaccine \(62b\)](#)
 5. [Influenza \(Flu\) Season](#)
- Immunize BC website at: <https://www.immunizebc.ca/> BCCDC Immunization Manual: Part 4 - Biological Products at: <http://www.bccdc.ca/health-professionals/clinical-resources/communicable-diseasecontrol-manual/immunization/biological-products>
 - BCCDC Immunization & Vaccines for Health Professionals at: <http://www.bccdc.ca/health-professionals>
 - Influenza Education BCCDC Influenza Courses: BCCDC Foundations of Influenza: Diseases and Vaccinations & Seasonal Influenza Update 2018/19 please visit: [Immunization Courses](http://www.bccdc.ca/health-professionaleducation-development/immunization-courses) at <http://www.bccdc.ca/health-professionaleducation-development/immunization-courses>

Submitted by:

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Regional Immunization Lead
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Influenza Control Program for Health Care Workers

The Ministry of Health has confirmed the Influenza Prevention Policy will be implemented throughout BC health care organizations this fall. Northern Health, together with all other health authorities, is in the process of implementing this policy for the 2018/19 influenza season.

The Influenza Prevention policy requires all employees, physicians, students, volunteers, contractors, and visitors to be vaccinated annually against influenza or wear a procedure mask at all times when in patient care areas during the Policy Application Period, which begins December 1, 2018.

During a declared influenza outbreak, Northern Health's "Influenza Exclusion Criteria (Suspected and/or Confirmed Outbreak)" Policy is also activated for the affected facility, and takes precedence over the Influenza Prevention Policy in the event of any discrepancy between the two.

Physicians have access to influenza immunization from the following sources:

1. Workplace Health & Safety influenza vaccination clinics: These dedicated influenza immunization clinics will be available at most Northern Health facilities during a three week period, beginning October 15th. Clinic schedules are posted on the [OurNH Flu Clinics Page](#). (Clinics usually occur during business hours on weekdays). Peer Immunizers (PIs) are also available in a variety of sites and departments throughout Northern Health. They immunize within their departments, when they have time between regular duties. They may be available on evenings and weekends.
2. Public Health/Primary Care Nurses: Physicians may choose to access [public influenza immunization](#) clinics. Schedules for these clinics will be distributed by each community's Health Unit.
3. Participating pharmacies and physician's offices: Physicians may choose to receive their influenza immunization at participating pharmacies, or from a colleague.

Please note that in all cases, physicians are eligible for FREE influenza immunization, as per the criteria set out by the BC Centre for Disease Control. Per provincial policy, physicians must report their immunization, or their decision to mask while working within Northern Health facilities, at the following address: <https://medicalstaffhealth.phsa.ca/>.

Working collaboratively with MHOs and physicians is an important part of Northern Health's influenza prevention program and physicians' support is an important factor for success. If you have any questions regarding the campaign, please email: influenza@northernhealth.ca and we will be happy to connect with you. There will be further information provided as the campaign progresses.

Submitted by: Courtenay Kelliher
Occupational Health Nurse & Safety Advisor
Workplace Health & Safety



2018-19 Seasonal Influenza: What You Need to Know



Community Vaccine Provider
Influenza Vaccine Order Form

Name of pharmacy/clinic/facility/other: _____

Contact person: _____ Date of order: _____

Address: _____ Phone #: _____ Fax #: _____

Vaccine	Doses requested	Doses remaining in fridge	Health Unit use only		
			Doses supplied	Date	Panorama req #
Pneumococcal polysaccharide					
See back of page for indications by age group	Flumist (Unable to provide to pharmacists)				
	Fluviral				
	Fluzone				
	Influvac				

Community provider/designate: _____ Sign upon receiving biologicals
 Pick-up date: _____ Health Unit staff signature: _____

Community provider/designate: _____ Sign upon receiving biologicals
 Pick-up date: _____ Health Unit staff signature: _____

All vaccines supplied must be accounted for. Community vaccine providers are required to keep track of all influenza vaccines and doses given and the age groups they are provided to.

Health Unit will keep a copy of the order form.

Northwest	Northern Interior	Northeast
Atlin Health Centre T: 250-651-7677 F: 250-651-7687 Dease Lake T: 250-771-4444 F: 250-771-3911 Hazelton T: 250-842-4640 F: 250-842-4642 Houston T: 250-845-2294 F: 250-845-7884 Kitimat T: 250-832-3181 F: 250-832-7081 Masset T: 250-626-4727 F: 250-626-5279 Prince Rupert T: 250-622-6380 F: 250-622-6391 Queen Charlotte City T: 250-559-4933 F: 250-559-8037 Sandspit T: 250-637-5403 F: 250-637-2496 Smithers T: 250-847-6400 F: 250-847-5908 Stewart T: 250-636-2221 F: 250-636-2715 Terrace T: 250-631-4200 F: 250-638-2264	Burns Lake T: 250-692-2460 F: 250-692-2469 Fort St. James T: 250-996-7178 F: 250-996-2216 Fraser Lake T: 250-699-8960 F: 250-699-6987 Mackenzie T: 250-997-8517 F: 250-997-3253 McBride T: 250-569-2251 ext 2026 F: 250-569-2232 Prince George T: 250-565-7367 F: 250-565-7377 Quesnel T: 250-991-7571 F: 250-991-7577 Valemount T: 250-566-9138 ext. 2000 F: 250-566-4319 Vanderhoof T: 250-567-6900 F: 250-567-6170	Chetwynd T: 250-788-7300 F: 250-788-9877 Dawson Creek T: 250-719-6500 F: 250-719-6513 Fort Nelson T: 250-774-7092 F: 250-774-7096 Fort St John T: 250-263-6000 F: 250-263-6086 Hudson's Hope T: 250-783-9991 F: 250-783-9125 Tumbler Ridge T: 250-242-5271 F: 250-242-3889



10-400-7012 (LC - Rev. - 09/18)



2018-19 Seasonal Influenza: What You Need to Know



Community Vaccine Provider
Influenza Vaccine Order Form

Orders will be filled based upon:

- Vaccine shipments from BCCDC over a period of 3 to 4 weeks
- Historic dosage reporting
- Availability

Note: Depending on the local health unit's inventory, specific brands may not be available and an interchangeable product may be supplied.

Instructions for Community Vaccine Provider (CVP)

- Using this form, submit your order by fax to your community Health Unit.
- Please keep a copy for your records
- The CVP or designate is required to sign for receipt of the influenza vaccine upon pick-up at the Health Unit.
- The CVP will need to submit a new order for subsequent orders.

Instructions for the Health Unit Biological Product Monitor/Designate

To fill the CVP's complete/partial order:

- Record the number of doses in the "doses supplied" column
- Record the date the vaccine is packaged and available for pick-up in the date column
- Record the Panorama Requisition Number
- Contact CVP for pick-up
- The health unit staff is required to sign when order is picked up

Influenza vaccine accountability

- Publicly funded influenza vaccine must be accounted for. Vaccine utilization must be reported in order to ensure vaccine supply for the following year.
 - Return expired/unused vaccine back to the local Health Unit when requested.
- The Publicly Funded Influenza Vaccine Tally form is available on the Northern Health website to assist with vaccine tracking.

Cold chain

Always maintain the cold chain (2° to 8°C) and contact the health unit immediately if you experience cold chain problems.

Age group	Vaccine	Comments
6 to 23 months	• Fluzone quadrivalent	• For children 6 to 23 months of age, Fluzone quadrivalent is the recommended product. If Fluzone quadrivalent is unavailable, Fluviral should be used.
2 to 17 years of age	• Flumist quadrivalent • Fluzone quadrivalent	• <i>If a quadrivalent product is unavailable, Fluviral or Influvac should be used.</i> • Influvac is approved for those 3 years of age and older.
18 years of age and older	• Fluviral • Influvac	• Influvac is a single dose thimerosal-free product and should be used for individuals with a known hypersensitivity to thimerosal. • In the event of a surplus of Fluzone quadrivalent in the provider's inventory beyond that required for those under 18 years old, this vaccine may be provided to those 18 years of age and older.

