



Information for Health Care Providers (01-14-2010)

Vaccine Facts for Health Care Providers

Anthony J. Billittier IV, MD, FACEP. Commissioner of Health

Answers to Common Influenza Vaccine Questions for Health Care Providers

- **Should the H1N1 influenza vaccine be offered to a patient who had an influenza-like illness (ILI) between April 2009 and now?**
YES. Unless the patient had a confirmed positive H1N1 real-time reverse transcriptase polymerase chain reaction (rRT-PCR) test result, s/he should be vaccinated for H1N1. Most people with respiratory illnesses since this spring have not had testing with the rRT-PCR test, which is the only test that can confirm infection specifically with the 2009 H1N1 virus. Tests such as rapid antigen detection assays, and diagnoses based on symptoms alone without rRT-PCR testing, cannot specifically determine if a person has 2009 H1N1 influenza. There is no harm in vaccinating an individual who has been infected with H1N1 virus.
- **Can a person with a mild upper respiratory tract infection receive nasal spray influenza vaccine?**
YES. The nasal-spray flu vaccine can be given to people with minor illnesses (e.g., diarrhea or mild upper respiratory tract infection with or without fever). However, if nasal congestion is present that might limit delivery of the vaccine to the nasal lining, then delaying of vaccination until the nasal congestion is reduced or use of injectable vaccine should be considered.
- **Can H1N1 vaccine be administered at the same visit as other vaccines?**
Inactivated 2009 H1N1 vaccine can be administered at the same visit as any other vaccine, including pneumococcal polysaccharide vaccine. Live (nasal- spray) 2009 H1N1 vaccine can be administered at the same visit as any other live or inactivated vaccine (e.g. MMR) **EXCEPT seasonal live attenuated (nasal- spray) influenza vaccine.** If live vaccines are not administered at the same visit, then these vaccines should be separated by at least 28 days.
- **If a child needs two doses of either seasonal or H1N1 influenza vaccine, can you give the child one dose of the inactivated vaccine and one dose of the live vaccine? YES.**
- **If a child will need a second dose of H1N1 vaccine because of age <10 years, should the provider set it aside for the child on the day they receive the first vaccine? NO.**
- **What is the time interval that should separate the first & second H1N1 vaccine dose for children <10 years old? The first and second dose should be separated by 28 days.** However, if the second dose is separated from the first dose by at least 21 days the second dose can be considered valid. If the interval separating the doses is <21 days the second dose should be repeated four weeks after the first dose was given.

URGENT MESSAGES REGARDING H1N1 VACCINE SHIPMENTS & SUPPLIES

- **Should I continue to stock H1N1 vaccines in my refrigerator?**
YES. The future of the H1N1 pandemic is unpredictable, and a 3rd wave may arrive this winter, spring or summer. Prevention of infection—by vaccination—is the best weapon for your patients to avoid disease.
- **Should I refuse H1N1 vaccine?**
NO. DO NOT REFUSE YOUR VACCINE SHIPMENT regardless of your current need or available storage.
Steps for the Local Provider (including all H1N1 PINs EXCEPT LHD and State/Federal Agencies):
 - The local provider will contact the ECDOH at 716-961-6860 and advise that they are in possession of vaccine that cannot safely be stored.
 - The LHD will facilitate the redistribution or storage of the vaccine and work out arrangements with you.
 - Thank you for your assistance with assuring that New York's allotment of vaccine stays in New York.

The Erie County Department of Health (ECDOH) does not provide medical advice. The information provided herein and on the ECDOH website is not intended as a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your personal physician or other qualified health provider with any questions you may have regarding a medical condition or issue. Never disregard professional medical advice or delay in seeking it because of the content found on the ECDOH website or this correspondence. Sign up to receive important information from the ECDOH at www.erie.gov/health/services/health_professionals.asp.