

Saskatchewan Immunization Manual Amendments **March 2017**

Instructions: Please remove and discard the corresponding pages in each chapter section and insert the amended pages as noted below in each corresponding chapter section dated **March 2017**.

Chapter 1 Introduction

- p. 11 Section 5.1 School Immunization programs (dated February 2016)
 - 2-dose HPV series added.
 - HPV-4 under vaccine title changed to HPV.
 - 1 dose Grade 6 varicella from 2004/05 to 2014/15.
 - 2-dose Grade 6 varicella from 2015/16 to present; birth cohort since Jan. 1/04.
- Section 5.2 History of Publicly Funded Immunizations and Programs in Saskatchewan (Various dates)
 - P. 12 - HB – Last row now states “40 mcg HB for persons \geq 18 years and double dose HB for those younger than 18 years approved for HIV or specific high risk conditions”.
 - P. 13 HPV – The following bullets have been added:
 - HIV positive boys 7-17 years as of December 2015.
 - 2-dose series starting in 2016-17 school year.
 - P. 13 Influenza – The Fluad year shows 2011/12 as season used.
 - P. 13 Mumps – cohort 2-dose catch up clarification

2003-2004	2 dose mumps catch-up in grade 6
2007 - 2013	2-dose mumps catch-up for eligible grade 12 students
2008 - 2013	2-dose mumps catch-up for eligible grade 8 students
2011-2013	2 nd dose provided to eligible Grade 6 students
 - P. 14 Meningococcal – The following bullets have been added:
 - December 2015 MenB for selected high risk persons.
 - January 2016 Men-P-ACYW-135 no longer available.
 - P. 14 Varicella – The following bullet has been added:
 - September 2015 Second dose for Grade 6 student (born since Jan. 1, 2004)

Chapter 5 Immunization Schedules

- P. 9 Section 1.8 Publicly Funded Vaccine Eligibility Criteria (Sept. 2016)
 - MenB vaccine added to list.
 - Polio now states “Those who have not completed a primary series”.
- P. 11 Minimum intervals for Specific Vaccine Series (May 2016)
 - Footnote 9 added to HB Routine indications.
- P. 27 Appendix 5.2: Adult Eligibility for Publicly Funded MMR Vaccine (September 2014)
 - New algorithm for quick guidance.
 - In #3, the dates referring to 1950 have been changed to 1957 to align within manual content and refers to travellers to endemic countries.
 - Indications 4 and 5 have been deleted.
- P. 28 Has been intentionally left blank.
- P. 30 Appendix 5.4 (May 2016)
 - As risk factor is now functional in Panorama, footnote now states: *Refer to Ch. 7 Special Populations for details re: non-immune women of childbearing eligible for publicly funded 2-dose series.

Chapter 7 Immunization of Special Populations

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- Appendix 7.1: Publicly Funded Vaccine Recommendations for Specific Populations by Risk Factor Category (both pages dated from 2016)
 - P. 33 – Footnote 5 removed from cochlear implant.
 - P. 34 – Footnote 6 now states “**Children only!** 1 dose for Pneu-C-13 naïve children 60 months up to and including 17 years of age”. **Please make sure staff are aware that adults cannot get Pneu-C-13 vaccine unless they are HSCT recipients!**
- Appendix 7.8 Publicly Funded Immigrant and Refugee Immunization and Serology Recommendations (May 2016)
 - Footnote #2 now states “Recommended if HC prevalence in country of origin is >3.5%. If HC ...”.
 - Previous footnote #3 pertaining to Var (serology not required for children 1-12 years old) removed; Previous #4 footnote now shown as #3,

Chapter 8 Administration of Biological Products

- TOC page 2 (October 2013)
 - New Appendix added: APPENDIX 8.2 MONOCLONAL ANTIBODY MEDICATIONS.
- P. 1 Section 1.1 Client Health Assessment (dated December 2016)
 - #12 revised now states, Has the mother taken any monoclonal antibody medications during her pregnancy with this child? (Refer to Chapter 8 Appendix 8.3 Monoclonal Antibody Medications for list).
 - #13 relating to breastfeeding removed as monoclonal antibodies transferred this way are negligible.
- **New!** Appendix 8.2 APPENDIX 8.2 MONOCLONAL ANTIBODY MEDICATIONS.
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Chapter 10 Biological Products

- The following products have updated product monograph link:
 - Gardasil 9 Bexsero ProQuad RabAvert
- The following GSK products indicate they are latex-free:
 - Infanrix-IPV Priorix-Tetra Boostrix Boostrix-Polio
- Menjugate (dated Feb. 2016) and NeisVac-C (dated August 2015)
 - Indication #3 has been changed; reference to HR persons removed and now reads, Meningococcal serotype C post-exposure immunoprophylaxis.
- Menomune is no longer publicly funded.
- Menveo (dated February 2016, 1st page)
 - First row in series for those 8 weeks through 5 months of age, now states followed by a 4th dose at 12 months of age.
- Rotarix (dated September 2016, 1st page)
 - The following bullet has been added under contraindications
 - Infants whose mothers took monoclonal antibody medications during pregnancy. Refer to Chapter Administration of Biological Products *Appendix 8.2 Monoclonal Antibody Medications*.
- Immune Globulin Preparation Injection Site, Needle Length and Total Site Volume per Age Group (dated August 2015) has new footnote:

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- ▲ Different immune globulin preparations **must be** separated by minimum 2.5 cm if given in the same limb (e.g., Tlg and Rablg in adult deltoid). **It is recommended to administer in different sites if possible.**
- Botulism antitoxin page (dated April 2014) updated and includes American product monograph as Canadian PM not posted yet.
- Diphtheria antitoxin page (dated April 2012) updated.