



Saskatchewan Immunization Manual Amendments November 2012

Instruction: 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 **November 2012**.

Chapter 5 Immunization Schedules

- p. 1 (dated October 2012) Section 1.1 Routine Immunization Schedules for Infants, Children and Adolescents
 - New footnote 12 added: “Prior to immunizing females of childbearing age with live vaccines, it is best practice to verbally screen them for pregnancy and counsel them to prevent pregnancy for one month post-immunization. Female students up to and including grade 6 do not require to be screened verbally for pregnancy or to receive counselling to avoid pregnancy for one month post-immunization prior to receiving live vaccines. Immunizers are encouraged to use their professional judgement to assess if pregnancy screening of individual female students in older grades is warranted, and to follow their regional screening policies as applicable”.
- p. 6 (dated August 2012) Section 1.5 Children 7 to 17 Years When Starting Immunizations
 - Footnote 3 revised to state: “Give MMRV to children 7 years up to and including 12 years of age (13 years of age if in grade 6) who are varicella susceptible, defined as varicella disease less than 12 months of age, or negative serum varicella IgG antibodies, or negative history of varicella, or herpes zoster diseases at 12 months of age and older and no history of varicella immunization. Give separate MMR and Var vaccines to varicella-susceptible children who are 13 years and older and not in grade 6. If child is varicella immune, provide MMR as noted in footnote 4”.
 - Footnote 11 revised to state: “Prior to immunizing females of childbearing age with live vaccines, it is best practice to verbally screen them for pregnancy and counsel them to prevent pregnancy for one month post-immunization. Female students up to and including grade 6 do not require to be screened verbally for pregnancy or to receive counselling to avoid pregnancy for one month post-immunization prior to receiving live vaccines. Immunizers are encouraged to use their professional judgement to assess if pregnancy screening of individual female students in older grades is warranted, and to follow their regional screening policies as applicable”.
- p. 7 (dated August 2012) Section 1.6 Adults 18 Years and Older When Starting Immunizations
 - First part of footnote 3 revised to state: “Prior to immunizing females of childbearing age with live vaccines, it is best practice to verbally screen them for pregnancy and counsel them to prevent pregnancy for one month post-immunization”.

Chapter 7 Immunization of Special Populations

- p. 24 (dated May 2012) Section 2.4 Individuals with Bleeding Disorders

Content reviewed by the Bleeding Disorders Clinic in Saskatoon.

 - Last bullet revised to state: “Although currently available plasma-derived products are routinely tested for viral contamination prior to administration, any patient with a bleeding disorder should still be considered at higher risk of contracting hepatitis A or B and should be offered these vaccines. Even when recombinant therapeutic products are being used, immunization for hepatitis A and/or B is still recommended in case the recombinant supply is unavailable and patients are required to switch to plasma-derived products at short notice”.



- Table 2.4A : HA and HB now state: Non-immune individuals with bleeding disorders and others who receive repeated infusions of blood or blood products or plasma-derived replacement clotting factors.

Chapter 10 Biological Products

- HA Publicly Funded Indications (dated October 2012)
 - 5th bullet revised to state: Non-immune individuals with bleeding disorders and others who receive repeated infusions of blood or blood products or plasma-derived replacement clotting factors.
- HB Publicly Funded Indications (dated May 2012)
 - 6th bullet revised: Non-immune individuals with bleeding disorders and others who receive repeated infusions of blood or blood products or plasma-derived replacement clotting factors.
- Prevnar 13 Page 1 of 2 (dated April 2012)
 - INDICATIONS revised to state: “This vaccine is not publicly funded for **healthy** individuals aged 5 years and older”.