

## Saskatchewan Immunization Manual Amendments **Jan. 2018**

**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 **January 2018**.

### Chapter 1 Introduction

- P. 12 – Updates made re: Tdap for pregnant women and Tdap-IPV for school entry booster.
- P. 13 – Updates to HPV section.
- P. 14 – Children with HIV eligible for Men-C-ACYW-135 vaccine.

### Chapter 5 – Immunization Schedules

- P. 1 – Section 1 Routine Imms Schedules for Infants, Children and Adolescents
  - Men-C-ACYW-135 and HPV-9 indicated for special populations.
  - Footnote #3 now states, “People born since Jan. 1/82 who live in the Athabasca Health Authority or on reserves in Saskatchewan (excluding Creighton, Air Ronge and La Ronge) regardless of where they access immunization services.
  - Footnote 7 now states, Tdap can be administered any time (e.g., the next day) after a tetanus-diphtheria toxoid–containing vaccine was given.
- P. 5 - Section 1.4
  - Footnote #3 now states, “People born since Jan. 1/82 who live in the Athabasca Health Authority or on reserves in Saskatchewan (excluding Creighton, Air Ronge and La Ronge) regardless of where they access immunization services.
- P. 6 - Section 1.5
  - HPV-9 indicated for special populations.
  - Footnote 6 now states, “Self-reported varicella disease after 1 year of age is only acceptable as...”
  - Footnote 7 now states, “One dose for those born since January 1, 1993 to September 30, 2000 who are not in Grade 6.”
  - Min. age 9 years old added to footnote 10.
  - Footnote #12 now states, “People born since Jan. 1/82 who live in the Athabasca Health Authority or on reserves in Saskatchewan (excluding Creighton, Air Ronge and La Ronge) regardless of where they access immunization services.
- P. 7 – Section 1.6
  - HPV-9 indicated for special populations.
  - Under footnote 5 Varicella susceptibility, the note now states, “NOTE: Verbal history of disease after 1 year of age is generally accepted as evidence of immunity for persons born before January 1, 2003.
  - Footnote 9 now states, “One dose for healthy adults 65 years and older; if they received a dose before 65 years old, they cannot get another dose.”
  - Previous footnote 10 re: LAIV and contraindicated populations removed.
  - Footnote # 10 now states, “People born since Jan. 1/82 who live in the Athabasca Health Authority or on reserves in Saskatchewan (excluding Creighton, Air Ronge and La Ronge) regardless of where they access immunization services.
- P. 8 – Section 1.7
  - New bullet added for Td (or Tdap) row - Tdap can be given any time after Td if required (e.g., the next day).
- P. 9 – Section 1.8
  - **New!** Vaccines for individuals with specific high-risk medical conditions are all marked with \*.
- P. 11 – Section 2.1 Minimum Intervals
  - Minimum ages added to several vaccines.
  - Minimum intervals for the 4-dose Bexsero schedule corrected.
  - Footnote 11 added to 3 dose HPV series.

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### P. 15 Section 3.5.1

- Doses/intervals corrected for CMVlg, IVlg and packed red blood cells as per CIG.

### P. 17 – Section 3.7.2

- Tetanus table revised for time since last dose given.

### **Chapter 6 Contraindications and Precautions**

- Pp. 2-3 – Section 2.1 and Section 2.2
  - Section amended to align with CIG, please review as format has been updated.

### **Chapter 7 Immunization of Special Populations**

- P. 10 Section 2.10 Malignancies/Cancer
  - New bullet added to this section - \*Please note that individuals who present as ‘cancer-free’ in the future do not qualify for additional vaccine doses (i.e., a second dose of Pneu-P-23) as their risk is the same as everyone else.
- P. 14 section 3.2A Immunocompromised Conditions
  - Detailed HPV-9 eligibility added to table.
- P. 16 Section 3.3A HIV
  - Detailed HPV-9 eligibility added to table.
  - Men-C-ACYW-135 added to table for children 2 months to 17 years inclusive.
  - Men-C-ACYW-135 to replace routine Men-C-C at 12 months of age.
- P. 19 Section 3.7 Medical Treatment
  - Section rewritten and formatted for inactivated and live vaccine recommendations.
- P. 20 Section 3.7A Medical Treatment
  - Detailed HPV-9 eligibility added to table.
- P. 21 Section 4.0 Post –exposure
  - Third sentence of first paragraph now states: *“If she is HBsAg is positive or has an unknown status but ...”*
- Pp. 33-34 Appendix 7.1 both pages
  - HPV added to specific immunocompromised conditions. Footnote #10 removed from HIV and page 34.
  - Men-C-ACYW-135 added to HIV with footnote #9 indicating that this is for children only.
- P. 37 Appendix 7.4
  - Algorithm updated for dosing and scheduling of both vaccines for renal clients.

### **Chapter 10 Biological Products**

- Table of Contents
  - Page 2 – Trumenba added under Meningococcal B Vaccine
  - Page 3 - Td Adsorbed moved here from page 2
- PEDIACEL®
  - Added to footnote #1: Minimum age is 6 weeks.
- Publicly Funded Hepatitis A (HA) Vaccine Indications
  - Bullet 1 now states, “People born since Jan. 1/82 who live in the Athabasca Health Authority or on reserves in Saskatchewan (excluding Creighton, Air Ronge and La Ronge) regardless of where they access immunization services.”
- Publicly Funded Hepatitis B (HB) Vaccine Indications
  - Updated bullet:
    - Household/sexual/close contacts of individuals who have an acute or chronic HB infection<sup>6</sup>.
      - Includes children in a child care setting in which there is an HB infected individual.

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- ENGERIX®-B and RECOMBIVAX HB® have updated pediatric scheduling:
  - 0.5 ml IM (10 mcg) at 0, 1 and 6 months<sup>5</sup> or 2, 4 and 6 months<sup>5</sup>
- GARDASIL®9
  - Detailed HPV-9 eligibility added to table.
- Immunization Recommendations for Children 4-6 years of Age
  - Footnotes 1, 2 and 3 revised. New footnotes 4, 5 and 6 added.
- All Men-C-ACYW-135 vaccines (Menactra, Menveo and Nimenrix) have new additions:
  - **New** eligibility bullet: HIV – ONLY for children up to and including 17 years of age.
  - **New** footnote #6 - 6 Patients being treated with SOLIRIS (eculizumab) are at high risk for Invasive Meningococcal Disease despite being immunized with meningococcal vaccines (CDC, 2017, [https://www.cdc.gov/mmwr/volumes/66/wr/mm6627e1.htm?s\\_cid=mm6627e1\\_e](https://www.cdc.gov/mmwr/volumes/66/wr/mm6627e1.htm?s_cid=mm6627e1_e)).
- BEXSERO
  - (4 week intervals) added to sub-bullet of 3-dose series bullet for infants 2-5 months old.
  - **New** footnotes added:
    - 1 Patients being treated with SOLIRIS (eculizumab) are at high risk for Invasive Meningococcal Disease despite being immunized with meningococcal vaccines (CDC, 2017, [https://www.cdc.gov/mmwr/volumes/66/wr/mm6627e1.htm?s\\_cid=mm6627e1\\_e](https://www.cdc.gov/mmwr/volumes/66/wr/mm6627e1.htm?s_cid=mm6627e1_e)).
    - 2 An increased risk of hemolysis or low hemoglobin has been observed when patients already being treated with SOLIRIS (eculizumab) get vaccinated against serogroup B meningococcal infection with Bexsero® (Alexion Pharma Canada, 2017).
- Prevnar 13
  - Page 1 - Minimum age 6 weeks old added under indications.
  - Page 2 – Footnote #5 now states, “...for specific medical condition recommendations and age restrictions. Medical high-risk...”
- PNEUMOVAX® 23
  - **New** footnote #5 added second page that applies to malignancies/cancer - <sup>5</sup> Individuals who are ‘cancer-free’ do not qualify for additional vaccine doses (i.e., a second dose of Pneu-P-23) as their risk is the same as everyone else.
- ROTARIX™
  - **Minimum age of 6 weeks noted.**
  - **New** bullet on both pages re: NG tubes - **NOTE:** The manufacturer has not addressed if Rotarix™ be given via g-tube but the CDC considers administration of rotavirus vaccine via g-tube to be an acceptable practice. Ensure the g-tube is flushed after Rotarix™ has been administered ([http://www.immunize.org/askexperts/experts\\_rota.asp](http://www.immunize.org/askexperts/experts_rota.asp)).
- Adacel, Boostrix, Adacel-Polio and Boostrix-Polio
  - Minimum age of 4 years old is specified for these vaccines.
- VARILRIX® (both pages) and VARIVAX® III (page 1)
  - Third bullet under footnote 1 now states, *NOTE: verbal history of disease before 1 year of age is unacceptable evidence of immunity for those born since Jan. 1, 2003.*
- HepaGam B® (page 2) and HyperHEP B® S/D (page 2)
  - Bullet 4 – 5<sup>th</sup> sentence now states, *For sexual exposures, ...* (Percutaneous has been removed)
- Updated product monographs:
 

ACT-HIB    MENJUGATE® and MENJUGATE® Liquid    Trumenba™    SYNFLORIX™    VARILRIX®    YF-VAX®