

Saskatchewan Immunization Manual Amendments **February 2016**

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 **February 2016**

Chapter 1 Introduction

p. 1 Section 1.0 INTRODUCTION and DISCLAIMER

- New medical directive statement in paragraph 1.

p. 2 section 1.1 SIM Purposes

- Some bullets in #1 reworded
- 2015 National Vaccine Storage and Handling Guidelines for Immunization Providers replace old document link

p. 11 section 5.1 School Immunization Programs

- End date of grade 6 varicella program removed

Chapter 2 Authorization to Immunize

p. 1 Section 1.1 Authorization to Immunize

- First bullet now begins: “Regional Health Authorities (RHAs) and First Nations Jurisdictions (FNJs)...”

p. 1 section 1.3 Provision of Publicly Funded Immunizations by Community Vaccine Providers that are not Registered Nurses

- First sentence last bullet ends as: “...local health unit according to provincial legislation”.

p. 2 section 1.4 National Advisory Committee on Immunization (NACI Guidelines)

- CIG info and link updated.

p. 4 section 3 References

- CIG info and link updated

Chapter 3 Informed Consent

p. 1 section 1.0 COMMUNICATION OF IMMUNIZATION BENEFITS AND RISKS

- First paragraph content amended to refer to unimmunized individuals exclusion for daycares, school and work during outbreaks.

p. 2 Section 1.1 Principles of Benefit and Risk Communication

- First paragraph CIG info updated for online version

p. 6 Step 2: Assess Ability to Give Informed Consent

- Last bullet now references CIG online

p. 7 Step 7: Document Informed Consent or Informed Refusal

- Third point removed
- Content revised to replace SIMS with Panorama.

Chapter 4 Documentation

- All content revised to replace SIMS with Panorama. **Please remove old chapter and insert complete new chapter dated February 2016.**

Chapter 7 Immunization of Special Populations

p. 16 section 3.3A: Publicly Funded Vaccines and Immune Globulins^{1, 4} – Human Immunodeficiency Virus

- MenB for children up to and including 17 years of age added
- HPV 3-dose series for boys 9 up to and including 17 years of age added

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pp. 33-34 Appendix 7.1: Publicly Funded Vaccine Recommendations for Specific Populations by Risk Factor Category

- MenB added to HIV row, as HIV + children eligible for vaccine.
- New footnote pertaining to above eligibility.

Chapter 8 Administration of Biological Products

p. 26 section 3.3 Evidence-Based Interventions for Pain and Anxiety

- 2 new resources and their links added for PHNs to review

pp. 27-28 section 3.4 Topical Anaesthetics

- All content updated by the medSask service at the University of Saskatchewan Faculty of Pharmacy and Nutrition

Chapter 10 Biological Products

- DUKORAL – new PM and link
- Havrix 1440 and 720 Junior – removal of latex in contraindications section
- ViVAXIM - new PM and link
- GARDASIL® -
 - Added indication - HIV infected males 9-17 years (3-dose series)
 - Added under 3-dose series - Immunocompromised – HIV (**HIV infected males 9-17 also eligible**)
- Ixiaro® - new PM and link
- MENJUGATE® and MENJUGATE® Liquid - new PMs and links
- Menveo™ - both pages
 - new PM and link
 - SERIES BASED ON AGE AT PRESENTATION – now shows intervals as per new PM and CIG recommendations
- BEXSERO® - both pages
 - new PM and link
 - New indication - Children up to and including 17 years of age who are infected with HIV
- IMOVAX® Rabies
 - New footnote* under series schedule 1B - *includes those taking antimalarials and/or any immunosuppressants (e.g., corticosteroids) that can result in immunosuppression.
- RabAvert®
 - new PM and link
 - New footnote* under series schedule 1B - *includes those taking antimalarials and/or any immunosuppressants (e.g., corticosteroids) that can result in immunosuppression.
- ROTARIX™ (both pages) - new PM and link
- VIVOTIF® - new PM and link

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Chapter 12 Anaphylaxis Management

p.7 Table 4: Appropriate Epinephrine Dosages According to Age and Weight

- Weight lb. corrected for ages 5-7; now 45-55 lb.
- Epi dose for 11-12 years amended to show 0.40 mL instead of 0.4 mL

Chapter 14 Appendices

Appendix 14.3 Immunization Fact Sheets

- Missing French titles added

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Chapter 5 Immunization Schedules

- p. 5 section 1.4 Children 1 year and Older but less than 7 years Who Present for Immunizations (Feb. 2015)
 - New footnote #12: **If Men-C-ACYW-135 has been received \geq 1 year old, Men-C-C not required.**
- p. 6 section 1.5 Children 7 to 17 Years Who Present for Immunizations (Aug. 2015)
 - Second sentence of *footnote corrected to read: They are considered up to date if the 3rd Tdap dose was given \geq 7 years of age.
- p. 7 section 1.6 Adults 18 Years and Older Who Present for Immunizations (Feb. 2015)
 - Footnote 1 amended: **All adults eligible to complete 3-dose IPV series. Booster doses of IPV are not publicly funded.**
- p. 9 section 1.8 Publicly Funded Vaccine Eligibility Criteria (Feb. 2015)
 - Third bullet amended: **Individuals who started a routine publicly funded series in another jurisdiction will receive immunization services to complete their vaccine series only if that series complies with the SK routine immunization program or if that individual qualifies under a Special Population status. For example, infant HB series would be continued; however, HPV for boys or Men-C-C under a year of age would not be publicly funded.**
 - New bullet added to Pneu-C-13: **Adult HSCT recipients. Refer to SIM, [Chapter 7, Immunization of Special Populations](#).**
- p. 10 section 2.0 MINIMUM INTERVALS BETWEEN VACCINE DOSES (May 2012)
 - Third bullet amended: Minimum intervals **may** be used when an individual starts an immunization series at a later age/date or has fallen behind the routine immunization **schedule**.
- p. 11 section 2.1 Minimum Intervals for Specific Vaccine Series (April 2015)
 - **Age parameters added to HPV and 2-dose HB rows in table.**
 - Footnote 11 – Reference added.
- p. 14 section 3.5 Spacing of Live Vaccines, Blood Products and Passive Immune Globulin Preparations (April 2012)
 - Third bullet amended: If the interval between administration of **a measles, mumps, rubella, or varicella-containing vaccine** and subsequent administration of an immune globulin preparation or blood product is less than 14 days, immunization should be repeated at the interval indicated in the table below.
- p. 17 section 3.7 Tetanus Prophylaxis in Wound Management (June 2014)
 - Third row in section 3.7.2 - 7 years and older amended: At least 3 doses of tetanus toxoid, with the most recent **\leq 5 years ago**.
- p. 29 Appendix 5.3: Grade 8 Tdap Algorithm (Jan. 2015)
 - First box amended to reflect Panorama forecaster: Has this grade 8 student received at least 3 doses of a tetanus-containing vaccine at appropriate intervals with the **last dose given after 7 years of age?**
- p. 30 Appendix 5.4 Publicly Funded Varicella Immunization Eligibility* and Panorama Directives (Sept. 2015)
 - First bullet in second row amended: Will forecast **all** required doses as eligible forever.
 - **Last bullet removed** from last row in last column as duplicate of third bullet.
 - New footnote: ***Refer to Ch. 7 Special Populations for details. Non-immune women of childbearing eligible for publicly funded 2-dose series; not currently implemented into Panorama forecaster.**

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Chapter 7 Immunization of Special Populations

- TOC page 2 (dated November 2015)
 - **New! Appendix 7.8 Publicly Funded Immigrant and Refugee Immunization and Serology Recommendations.**
- P. 27 section 6.5 Publicly Funded Vaccines - Healthcare - RHA/SCA/FNJ and Students (Jan. 2015)
 - HB immunity criteria amended: Documentation of **an age-appropriate** 2 or 3 dose HB series and adequate serologic antibodies at least 4 weeks post immunization;
- p. 28 section 7.2 Individuals Recently New to Canada (Jan. 2015)
 - New bullets added:
 - **Refer to Appendix 7.8 Publicly Funded Immigrant and Refugee Immunization and Serology Recommendations when assessing individuals recently new to Canada.**
 - **For specific vaccine eligibility information, refer to SIM, [Chapter 5 Immunization Schedules](#). All immunization recommendations in chapter 5 are for routine immunizations. Individuals may be eligible for additional vaccines based on health conditions or other risk factors.**
 - **For specific vaccine information, refer to SIM [Chapter 10 Biological Products](#).**
- p. 30 section 7.2 Individuals Recently New to Canada
 - **Last 2 bullets removed, added onto p. 28 (above).**
- P. 33 Appendix 7.1: Publicly Funded Vaccine Recommendations for Specific Populations by Risk Factor Category
 - **Footnote marker # 6 added in the table for Transplant candidate or recipient - Solid organ / tissue**
- **P. 41 New! Appendix 7.8: Publicly Funded Immigrant and Refugee Immunization and Serology Recommendations**

Chapter 10 Biological Products

- DUKORAL® – **Valneva** replaces Crucell Vaccines (Feb. 2016)
- INFANRIX® hexa (Aug. 2015) and HIBERIX® (Nov. 2015)
 - New Product monographs
- GARDASIL® (Feb. 2016)
 - Series section updated as follows:
 - First bullet: **2-dose schedule:** 0.5 mL IM at 0 and 6 months for girls 11 to 14 years of age (includes grade 6 girls 9 to 14 years old).
 - New bullet added as second bullet: **3-dose schedule:** 0.5 mL IM at 0, 2, and 6 months for immune competent females ≥15 years of age (and born since January 1, 1996) up to and including 26 years of age (ineligible at 27th birthday).
 - Second bullet moved down as third bullet
- MMR II (Aug. 2015 p. 1) and Priorix (Fe. 2015 p. 1)
 - Precautions section, 3rd bullet, 2nd sentence amended: Rubella-susceptible women who receive anti-Rho (D) immune globulin post-partum should either be given MMR vaccine at the same time and tested **3** months later for rubella immunity, or should be immunized with MMR vaccine **3** months post-partum, with follow-up ensured (**Ref: CIG Evergreen**).
- SYNFLORIX® (Fe. 2015)
 - New Product monographs

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- Prevnar® 13 (Sept. 2015)
 - Pg. 1: New Product monographs
 - Pg 2: Adult vaccine interval requirements detailed: **NOTE: For those 18 and older, a 1-year minimum interval is required if Pneu-P-23 is given before Pneu-C-13, and an 8 week interval is required if Pneu-C-13 is given before Pneu-P-23. HSCT recipients may be an exception to this recommendation.**
- Pneumovax 23 (p. 2 April 2015)
 - Adult vaccine interval requirements detailed: **NOTE: For those 18 and older, a 1-year minimum interval is required if Pneu-P-23 is given before Pneu-C-13, and an 8 week interval is required if Pneu-C-13 is given before Pneu-P-23. HSCT recipients may be an exception to this recommendation.**
- IMOVAX® Polio (April 2015)
 - Indication 3(Adults ≥ 18 years) and footnote 1 updated: **Adults who have received a 3-dose primary polio series are exempt, and booster doses are not publicly funded.**
- HYPERTET® S/D (both pages Sept. 2012)
 - **Footnote marker 1 removed from indication 2.**
 - **Pages reformatted.**

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Chapter 1 Introduction

- Table of contents (April 2012)
 - **New!** Appendices 1.3 and 1.4.
 - P. 1 Section 1.0 INTRODUCTION and DISCLAIMER for PUBLIC HEALTH NURSES (Feb. 2016) (renamed)
 - **Medical Directive** added to this section to align with SRNA directives.
- New!**
- APPENDIX 1.3: SAMPLE PROVISION OF PUBLICLY FUNDED BIOLOGICAL PRODUCTS BY PUBLIC HEALTH NURSES Page 21
 - APPENDIX 1.4: SAMPLE ANAPHYLAXIS MANAGEMENT IN A CLINIC OR COMMUNITY SETTING BY PUBLIC HEALTH NURSES POST- ADMINISTRATION OF PUBLICLY FUNDED BIOLOGICAL PRODUCTS Page 24

Chapter 2 Authorization to Immunize

- P. 1 Section 1.2 Provision of Publicly Funded Immunizations by Registered Nurses Employed by Organizations Other than Public Health (Feb. 2016)
 - **2 new SRNA documents and web links** replaced previous 2 documents.

Chapter 5 Immunization Schedules

- p. 7 section 1.6 Adults 18 Years and Older Who Present for Immunizations (May 2015)
 - Footnote 9 amended: **For those 18 and older, a 1-year minimum interval is required if Pneu-P-23 is given before Pneu-C-13, and an 8 week interval is required if Pneu-C-13 is given before Pneu-P-23. HSCT recipients may be an exception to this recommendation.**
- p. 9 section 1.8 Publicly Funded Vaccine Eligibility Criteria (Feb. 2015)
 - **Polio bullet** amended: **Adults who have not completed a 3-dose primary series.**

Chapter 7 Immunization of Special Populations

- Table of contents second page (May 2016)
 - **CC (Community Clinic)** added to sections 6.3 and 6.5 titles.
- The following footnotes were removed from the identified sections noted as immunizers are expected to refer to SIM chapter 10 for specific vaccine information.
 - ² Refer to SIM, Chapter 5, [Immunization Schedules, Section 1.3B, Pneumococcal Conjugate Schedule for Medically High Risk Children.; and/or](#)
 - ³ Refer to SIM, [Chapter 5, Immunization Schedules, Section 1.2, Hib Schedule for Children Delayed by 1 Month or More.](#)
 - Removed as appropriate from sections:
 - P. 6 (2.2, 2.3), p. 7 (2.4), p. 8 (2.5, 2.6, 2.7), p. 9 (2.8, 2.9), p. 10 (2.10), p. 11 (2.11), p. 12 (2.12), p. 13 (2.13), p. 14 (3.0), p. 16 (3.3), and p. 20 (3.7).
- P. 26 (April 2015)
 - **Reference to Community Clinics (CC)** added to section 6.2 and 6.3.
- P. 27 Public Funded Vaccine – Healthcare (May 2016)
 - **Reference to Community Clinics (CC)** added to title
- p. 31 section 7.4 Travellers
 - **IPV information** updated.

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- P. 34 Appendix 7.1: Publicly Funded Vaccine Recommendations for Specific Populations by Risk Factor Category (February 2016)
 - * Footnote re: pre-immunization serology removed.

Chapter 10 Biological Products

- Table of contents second page (Sep 2015)
 - [Influenza Vaccine section.](#)
- Publicly Funded HA Vaccine Indications
 - [Minimum case contact eligibility age is now 6 months instead of 12 months.](#)
 - [Footnote 1 now states, "If a client received 1 dose of a HA-containing vaccine more than 6 months previously, provide a 2nd dose of HA vaccine."](#)
- HA vaccines (Avaxim peds; Havrix 740; and Vaqta peds) eligibility age changed to 6 months of age, however this only applies as per the updated indications above.
- HAVRIX® - [new 2016 product monograph web link \(inclusive for Havrix 1440 and Havrix 720 Junior\).](#)
- Twinrix vaccines (January 2015)
 - [Footnote 2 now states, "HAHB vaccines may be used for the following high risk clients who are HA and HB non-immune and don't require a higher dose of HB vaccine"](#)
- ZOSTAVAX (November 2015)
 - [2016 product monograph link added](#)
- Influenza vaccines: [All publicly funded and non-publicly funded vaccine information and links have been updated.](#)
- NIMENRIX® (both pages)
 - [2016 product monograph link updated.](#)
- Pneumovax® 23 Pneumococcal polysaccharide 23-valent vaccine (both pages)
 - [2016 product monograph link added.](#)
- Rotarix (Feb. 2016 page 1 of 2)
 - [New bullet added under Precautions: Excretion of the vaccine virus in the stools is known to occur after vaccination and lasts for 10 days on average with peak excretion around the 7th day. Contacts of recent vaccinees should be advised to observe careful hygiene \(including washing their hands\) when changing children's diapers.](#)
- Varilrix (both pages)
 - [Link corrected, now goes to correct site.](#)
- Varivax III (both pages)
 - [2016 product monograph link added](#)
- HepaGam B®(both pages)
 - [2016 product monograph link added](#)
- IMOGAM Rabies Pasteurized (both pages)
 - [2015 product monograph link added.](#)
 - [Latex free product.](#)
- VariZIG™ (both pages)
 - [2016 product monograph link added](#)

Chapter 14 Appendices

- Appendix 14.3 Immunization Fact Sheets
 - [Updated content and links.](#)

Saskatchewan Immunization Manual Amendments **Oct. 2016**

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Chapter 9 Management of Biological Products

Please remove all pages of the previous chapter 9 and replace with the complete revised chapter 9 (all pages dated October 2016).

Saskatchewan Immunization Manual Amendments **December 2016**

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Chapter 8 Administration of Biological Products

- Table of content first page (April 2014) updated.
- P. 1 section 1.1.1 General Screening questions (August 2012)
 - New screening questions added:
 1. Has the mother taken any immune-suppressing drugs during her pregnancy with this child?
 2. Has the mother taken any immune-suppressing drugs while breastfeeding this child?
- P. 2 Section 1.3.1 Pre-Preparation: Pre-Loading of Syringes (October 2013)
 - Directions removed as not a recommended practice.
 - New statement: Pre-preparation of prefilled syringes and pre-loading of syringes with biological products that come in vial or ampoule presentations is discouraged because of the uncertainty of product stability in syringes, risk of contamination, increased potential for administration errors, and biological product wastage.
- P. 3 Section 1.3.2 Preparation Instructions (August 2012)
 - #1 instruction updated: 10 Rights of medication prepare products have been added.
- P. 4 Section 1.3.3 Vials and section 1.3.4 Vaccine with Diluents (August 2012)
 - New statement added to 1.3.3 #5: Do not insert blunt needles with or without a filter into vials because of coring risk.
 - New statement added to 1.3.4 #2: Do not insert blunt needles with or without a filter into vials because of coring risk
- P. 5 section 1.3.6 Multidose Vials (April 2014)
 - Section fully revised.
- P. 7 Section 1.5 Publicly Funded Immunizations Following Non-Conforming Situations (June 2014)
 - 4-Day Grace Period Principles - revised content.
- P. 8 (August 2012)
 - Sections 1.5.1 to 1.5.5 added to this page.
- P. 19 (Section 2.7) Table 2 (April 2014)
 - Direct copy of TB Skin Test Interpretations from Canadian Tuberculosis Standards, 7th Edition 2013.

Chapter 10 Biological Products

- HAHB (September 2016)
 - High risk population added on footnote #2 was left off previous update.
- Engerix B (Nov. 2015) and Recombivax HB (April 2015)
 - New footnote #5 added: Infant must be at least 24 weeks of age to receive 3rd dose.
- FluLaval tetra and Fluzone Quadrivalent (both September 2016)
 - Under Contraindications section for both vaccines, bullet #2 now states: History of anaphylactic reaction to any component of any influenza vaccine.
- Pneum-P-23 (page 1 September 2016)
 - Alcoholism added as noted on Pneu-P-23 fact sheet.
- IMOVAX® Polio (May 2016)
 - #1 Dose 3 now states: Dose 3: 0.5 mL SC given 8 weeks after dose 2.
 - New statement under 2 & 3: NOTE: At minimum, one dose must be given at or after 4 years of age.

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Chapter 14 Appendices

- p. 21 (September 2016)
 - Caring for Your Child's Fever date updated.