



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR PUBLIC HEALTH**

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Date: January 12, 2016

Due February 12, 2016

To: All Kentucky Vaccine Providers (except hospitals)

From: Ida Taylor
Kentucky Vaccine Accountability Section (VAS) Assistant Coordinator

Subject: Pre-Booking Influenza Vaccines for 2016-2017 Season by Vaccines for Children (VFC) Providers

The Centers for Disease Control and Prevention (CDC) requires VFC providers to pre-book influenza vaccine for the 2016-2017 season by February 12, 2016.

In order to adequately order and supply influenza vaccine to providers, VAS relies upon your pre-book information. **Every VFC provider must pre-book their influenza vaccine order for the 2016-2017 influenza season now.**

Providers who pre-book by the due date of February 12th will receive their vaccine order as VAS obtains the 2016-2017 influenza vaccine allocations. Vaccine will be delivered in partial shipments until your full order is met. Submit the order form below to pre-book influenza vaccine for **VFC-eligible** children through 18 years of age in your practice. These influenza doses may ***ONLY be used for VFC-eligible and KCHIP eligible children.*** No VFC vaccine doses may be given to any other patients, particularly those patients with private insurance.

Providers who do not pre-book should expect delays in receiving influenza vaccines for the 2016-2017 seasons, as compared to VFC providers who pre-book by the above stated deadline.

Also, the quantity available and/or formulation of influenza vaccine cannot be guaranteed. VAS will estimate the brand and number of doses needed for your practice based upon your order form. Please realize, if VAS allocates its entire influenza vaccine stock, the program may not be able to obtain additional vaccine from the Centers for Disease Control and Prevention (CDC) until later in the influenza season (possibly December 2016).

KVP cannot guarantee timing of vaccine shipments. According to CDC, the additional steps required for VFC vaccine distribution adds a minimum of 2 ½ weeks to distribution time, compared to private sector influenza vaccine released at the same time. Due to possible early shipment, your office should be open to receive vaccine deliveries during normal shipping hours beginning July 2016. KVP does not call when shipments are released to provider's offices. Lost influenza shipments may not be replaced if the supply is not adequate.

Annual influenza vaccination is recommended by CDC for EVERYONE aged 6 months and older.
You should request vaccine based upon your *reasonable expectation* of doses that will be used.

When calculating orders: Children aged 6 months through 8 years receiving flu vaccine for the first time should receive two doses at least one month apart; children aged 6 months through 8 years vaccinated for the first time in the 2015-16 season, but who received only one dose, should receive two doses in 2016-17. All others need one dose of vaccine. This guidance is subject to change pending release of ACIP's 2016-2017 recommendations for seasonal influenza vaccination.

Complete the vaccine request form and submit by February 12, 2016: The CDC has not released the presentations or formulations at this time, thus the options listed below may or may not be available. Several influenza vaccine brands have received FDA approval for a quadrivalent formulation. For the 2016-2017 season, KVP plans to only purchase quadrivalent formulation. Use this information to determine your order of injectable and nasal spray formulations on the vaccine request form. **Consider your vaccine storage space when you order!** Pre-filled syringes (PFS) require 5 to 10 times the amount of storage space as the same number of doses in multi-dose vials (MDVs).

Inactivated vaccine (injectable) options:

1. 6 months through 18 years of age: Fluzone® Quadrivalent MDV (Sanofi Pasteur, Inc.)
2. 6 months through 35 months of age: Fluzone® Quadrivalent preservative-free 0.25 mL PFS (Sanofi Pasteur, Inc.)
3. 36 months through 18 years of age: Fluzone® Quadrivalent preservative-free 0.5 mL PFS (Sanofi Pasteur, Inc.)
4. 3 years through 18 years of age: FLUARIX® QUADRIVALENT preservative-free 0.5 mL PFS (GlaxoSmithKline Biologicals)

Live Attenuated Intranasal Vaccine (LAIV)

2 years through 18 years of age (healthy and not pregnant): FluMist® Quadrivalent preservative-free 0.2 mL single-dose intranasal sprayers (MedImmune, LLC)

If you have questions regarding pre-booking seasonal influenza vaccine through VAS, please contact:

Ida Taylor, 502-564-4478 ext. 4268 or email Ida.Taylor@ky.gov (coordinates influenza orders)
Clarissa Goode, 502-564-4478 ext. 4267 or e-mail Clarissa.Goode@ky.gov (coordinates D Pins)
Rita Lathrem, 502-564-4478 ext. 4258 or e-mail Rita.Lathrem@ky.gov (coordinates H and SC Pins)
Jane Payne, 502-564-4478 ext. 4252 or e-mail Jane.Payne@ky.gov (coordinates OP, FQ, CC, and RH Pins)

cc: Kraig Humbaugh, MD, MPH
Robert Brawley, MD, MPH
Ardis Hoven, MD
Doug Thoroughman, PhD, MS
Margaret Jones, RN, BSN
Lee Ann Guice
Lucy Senters

Kentucky Vaccine Accountability Section (VAS) Pre-Book Form for Influenza Vaccine for 2016-2017 Season

VFC PIN#: _____ Date: _____

Provider Name: _____

Phone: (____) _____ Fax: (____) _____

Person Completing Order (print): _____

Address: _____

Formulations* and # of Doses: <i>MDV = multi-dose vial, PFS prefilled syringe</i>	Influenza Vaccine Brands
Indicate number of doses of each formulation (round to nearest 10). Note: If we are unable to pre-book the brand listed, we will substitute a different brand's equivalent formulation.	
6 months through 18 years of age MDV Non-High Risk Doses _____ High Risk Doses _____	Fluzone Quadrivalent MDV (Sanofi Pasteur) inactivated vaccine (injectable)
6 months through 35 months, 0.25 mL PFS Non-High Risk Doses _____ High Risk Doses _____	Fluzone Quadrivalent (Sanofi Pasteur) inactivated vaccine (injectable)
36 months through 18 years of age, 0.5 mL PFS Non-High Risk Doses _____ High Risk Doses _____	Fluzone Quadrivalent (Sanofi Pasteur) inactivated vaccine (injectable)
3 years through 18 years of age, 0.5 mL PFS Non-High Risk Doses _____ High Risk Doses _____	FLUARIX Quadrivalent (GSK) inactivated vaccine (injectable)
2 years through 18 years of age, 0.2 mL single-dose intranasal sprayers Non-High Risk Doses _____ High Risk Doses _____	FluMist Quadrivalent (MedImmune) LAIV

*Pre-filled syringe (PFS) and LAIV (FluMist) formulations are preservative-free, and require at least five times more storage space than an equivalent number of doses in multi-dose vials (MDV). Each 5 mL MDV contains a maximum of 10 doses withdrawn as 0.5 mL per dose).

Save a copy of your request for your files: unless otherwise informed, you will receive what you order in several shipments this fall as vaccine arrives at the distributor. Because of manufacturing differences, the preservative free vaccines packaged in PFS may be distributed later than the multi dose vials.

Please fax this form to (502) 696-4923 by **February 12, 2016**, or email your request to dph.kvp@ky.gov. (You can also put a "request a read receipt" option on the email to make sure we received the form.)