

Dawn M. Smith, MSNc, RN

**IMMUNIZE KALAMAZOO**  
**DECEMBER 8<sup>TH</sup>, 2016**

# IMMUNIZATION UPDATES

---

- × Vaccine supply
- × Holiday Shipping Black Out Days
- × VFC ordering updated
- × HPV ACIP Recommendation
- × MCV4 and HIV positive individuals
- × MI-VRP Program
- × Lost-Wasted Report

# IMMUNIZATION UPDATES: VACCINE SUPPLY

- ✘ Pentacel still on an allocation
  - Our allocation will increase by 50% as of December 1, 2016
- ✘ Tenivac® vaccines- both NDCs- will be temporarily unavailable.
  - Anticipating more available in the second half of 2017.
  - Grifols Td vaccine will be available beginning in December 2016.

# ADDITIONAL VACCINE UPDATES

- ✘ GSK has stopped producing new lots of MenHibrix.
  - GSK will continue to manufacture MENVEO® and HIBERIX® to cover the medical need.
- ✘ Sanofi's IPV and Hib vaccines will no longer be allocated as of December 1, 2016

# MCIR VFC E-ORDER PROJECTION

Product Description	NDC	On Hand	Avg Monthly	1Mo Proj	3Mo Proj	# of Doses	Price/Dose	Price
 DAPTACEL (sanofi) Package of 10 VIAL	49281-286-10	1	3	10	10	<input type="text" value="10"/>	\$16.73	\$167.30
 KINRIX (Glaxo) 10 X 1 SINGLE DOSE TIP-LOK SYRINGE	58160-812-52	26	2	0	0	<input type="text" value="10"/>	\$39.57	\$395.70
 HAVRIX (Glaxo) Package of 10 VIAL, SINGLE-DOSE	58160-825-11	0	1	10	10	<input type="text" value="10"/>	\$17.83	\$178.30
 RECOMBIVAX (Merck) Package of 10 VIAL, SINGLE-DOSE	0006-4981-00	20	4	0	0	<input type="text" value="10"/>	\$12.30	\$123.00
 ACTHIB (sanofi) Package of 5 VIAL, SINGLE-DOSE	49281-545-05	1	3	5	10	<input type="text" value="5"/>	\$9.55	\$47.75
 GARDASIL 9 (Merck) 10 VIALS, SINGLE-DOSE in 1 CARTON; .5 mL in 1 VIAL, SINGLE-DOSE	0006-4119-03	174	11	0	0	<input type="text" value="10"/>	\$141.60	\$1,416.00
 MENACTRA (sanofi) Package of 5 VIAL, SINGLE-DOSE	49281-589-05	217	8	0	0	<input type="text" value="5"/>	\$86.19	\$430.95
 M-M-R (Merck) Package of 10 VIAL, SINGLE-DOSE	0006-4681-00	243	10	0	0	<input type="text" value="10"/>	\$20.11	\$201.10
 PREVNAR-13 (Wyeth (WAL)) Package of 10 SYRINGE	0005-1971-02	133	7	0	0	<input type="text" value="10"/>	\$120.39	\$1,203.90
 ADACEL (sanofi) Package of 5 SYRINGE	49281-400-15	56	16	0	0	<input type="text" value="5"/>	\$31.37	\$156.85

**Total:** \$4,320.85

# OVER RIDE OPTIONS

**Override Reason**

Number of doses ordered for the following products is not within projected quantities. Please choose the item that best explains the overage/underage for each product:

KINRIX (58160-0812-52):	Recall
RECOMBIVAX (00006-4981-00):	Recall
GARDASIL 9 (00006-4119-03):	Recall
MENACTRA (49281-0589-05):	Back to School
M-M-R (00006-4681-00):	Disease Outbreak
PREVNAR-13 (00005-1971-02):	Special Clinic
ADACEL (49281-0400-15):	New Vaccine

# VFC FLU VACCINE DISTRIBUTION

- × We are fully allocated for all pre-booked requests, all are filled
- × Fluzone 0.25 syringe vaccine is available to order in MCIR
- × Fluzone 0.50 syringe vaccine is available to order in MCIR
- × Providers may order as they need, when they need of these two products

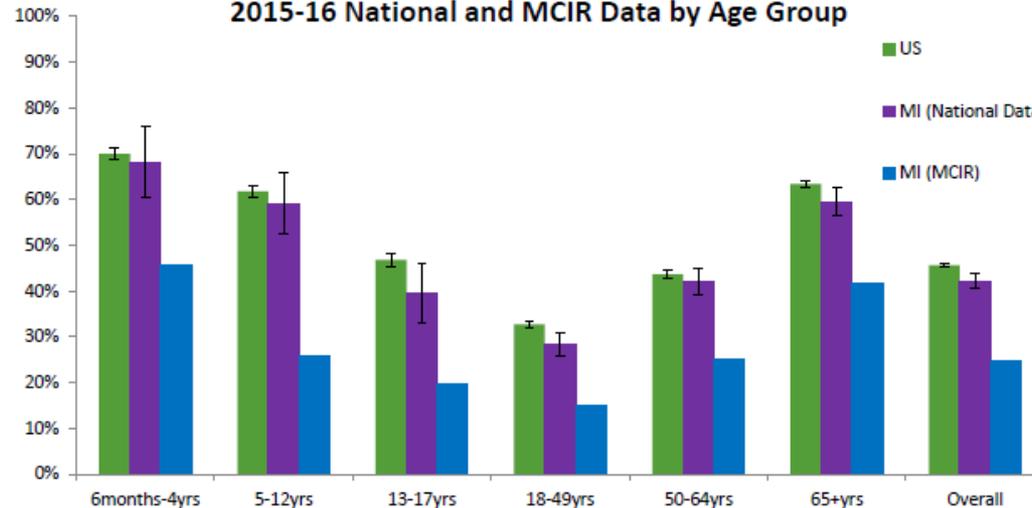
# FLU PRE-BOOK 2017-2018

---

- ✘ Celebrating Flu Vaccine awareness December 4<sup>th</sup>-10<sup>th</sup>
- ✘ Starting thinking about what you would like to pre-book for the 2017-2018 season
- ✘ Don't just base it on what you order or use
- ✘ Think about your population and consider what you would need to vaccinate 50% or greater
- ✘ New York pre-books based on 80%
- ✘ Maryland pre-books based on 75%
- ✘ Most Michigan providers pre-book 12-13%

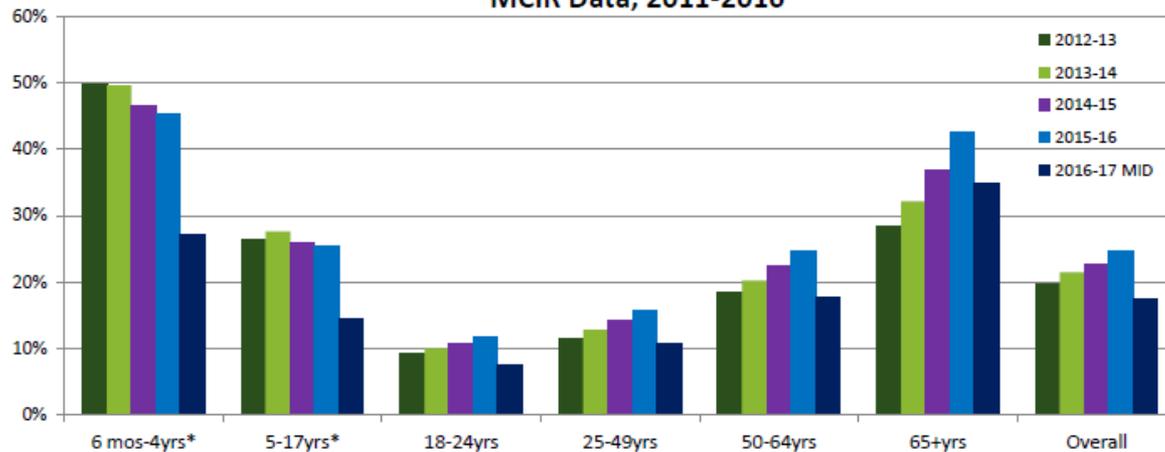
## 2015-16 NATIONAL FLU VACCINATION COVERAGE ESTIMATES

Influenza Vaccination 1+ Coverage, US vs. Michigan  
2015-16 National and MCIR Data by Age Group



## 2016-17 EARLY SEASON ESTIMATES - MCIR

Influenza Vaccination 1+ Coverage by Age Group  
MCIR Data, 2011-2016



\*Mid-season MCIR data as of November 14, 2016

## COUNTY QUARTERLY IMMUNIZATION REPORT CARD

**Kalamazoo**

*Data as of: September 30, 2016*

**Population**

	2015 Census	MCIR	Diff.	%
Total	260,263	253,608	6,655	2
Adults (20yrs+)	193,959	184,837	9,122	4
Children (0-19yrs)	66,304	68,771	-2,467	-3

**Immunization Sites**

	Count	(%)
Active MCIR Immunization Sites	131	
Reported in the last 6 months	93	70
Active Vaccines for Children (VFC) Sites	21	
Reported in the last 6 months	21	100
Reg. Reporting Flu Sentinels (% of Total Sites)	2	67

Michigan is ranked 44th for 4313314 coverage (2015 NIS data)

**Your County Immunization Rank**  
n = 84 counties

43133142 Coverage: 5  
(19-35mos)

1323213 Coverage: 3  
(13-17 Years)

Waivers: 23  
(Kindergarten, 7th Grade & Others)

Flu Coverage : 7  
(6 months through 8 yrs, up-to-date)

**How do your Immunization Measures Rank among Michigan's 83 Counties + Detroit (n=84)**

Measure	Kalamazoo (MCIR)	% Diff.*	MI Avg (MCIR)	US Average 2015 NIS	Your County Rank	HP 2020 Goal
<b>19 through 35 months</b>	%	%	%	%	No.	
Birth Dose Hep B coverage	79.8	0.5	78.8	72.4	43	85%
4313314 coverage†	81.2	0.0	75.2	72.2	10	80%
43133142 coverage†	66.8	0.1	54.5	-	5	-
2+ Hep A	68.0	0.2	56.2	59.6	5	85%
4+ DTaP	83.1	0.1	78.7	84.6	14	90%
4+ PCV	89.4	0.2	85.0	84.1	13	90%
UTD** Rota. (8-24 months)	82.2	-0.1	71.1	-	2	-
WIC coverage (4313314)	79.9	-1.7	76.8	65.7	35	-
Medicaid coverage (4313314)	80.1	-0.5	75.7	-	31	-
<b>13 through 17 years</b>				<u>2015 NIS Teen</u>		
132321 coverage‡	84.1	-0.7	74.2	-	14	-
1323213 coverage‡	41.7	1.1	28.0	-	3	-
1+ Tdap	87.4	-0.3	79.0	86.4	14	80%**
1+ MCV4	86.9	-0.5	79.1	81.3	15	80%**
3+ HPV (Females)	46.5	0.6	33.2	41.9	8	80%**
3+ HPV (Males)	38.7	1.5	25.0	28.1	3	-
UTD** Mening. (17 yrs)	58.1	2.0	44.5	-	4	-
<b>Adults (Census Denominators)</b>				<u>2014 NHIS</u>		
1+ Tdap (19-64yrs)	51.7	1.6	42.0	21.5	15	-
1+ PPSV (65+ yrs)	43.6	1.6	31.3	61.3	12	90%
1+ PCV13 (65+ yrs)	45.4	5.1	29.9	-	15	-
1+ Zoster (60+ yrs)	29.4	1.2	22.4	27.9	15	30%
<b>2015-16 Flu Season</b>	<b>Kalamazoo</b>		<b>MI Avg</b>	<b>US Flu Avg</b>	<b>Rank</b>	<b>HP2020</b>
UTD** Flu (6mo-8yrs)	38.9	4.6	28.6	-	7	-
1+ Flu (6mos through 17yrs)	40.6	-1.2	30.8	56.6	6	70%
1+ Flu (18yrs+)	28.8	5.1	23.1	41.5	20	70%
<b>School/CC Immunization Reports</b>	<b>Kalamazoo</b>		<b>MI Avg</b>	<b>Kalamazoo</b>	<b>Kalamazoo</b>	<b>Rank</b>
School Completion (Feb '16)	95.3	0.7	94.2	-	-	22
Percent Waived (K+7+O)	2.6	-0.4	3.1	Kindgtn : 2.2	7 grd : 2.6	23
Child Care Completion (Oct '15)	88.4	0.6	87.9	-	-	52
Percent Waived	1.2	-0.3	2.1	-	-	27

\* % difference in the county since the last report card; Flu data shows difference between seasons; School and CC diff. between annual reports

# IMMUNIZATION UPDATES: MDV SANOFI FLU

- ✘ The multi-dose vial of Fluzone Quadrivalent influenza
- ✘ **A maximum of 10 doses can be withdrawn from the multi-dose vial of Fluzone Quadrivalent.**
- ✘ If the vial has been punctured 10 times and you still have vaccine left, do not use it.
- ✘ MCIR will set your inventory for 10 doses, once the 10 doses (regardless if 0.5ml or 0.25ml) have been accounted for you should not have to worry about your inventory because MCIR will balance automatically.
- ✘ The important point to remember is that you should review the package inserts for storage and handling guidance.

# STORAGE AND HANDLING-VFC REQUIREMENT

- ✘ Min/Max temperatures must be recorded every 24 hours (okay to go 2 days without-weekend-reset Monday morning)
- ✘ January 1, 2017 requirement
- ✘ Chart on temperature logs
- ✘ There are different versions of temperature logs with the Min/Max charting
- ✘ VFC Resource Booklet section 2, page 20-29



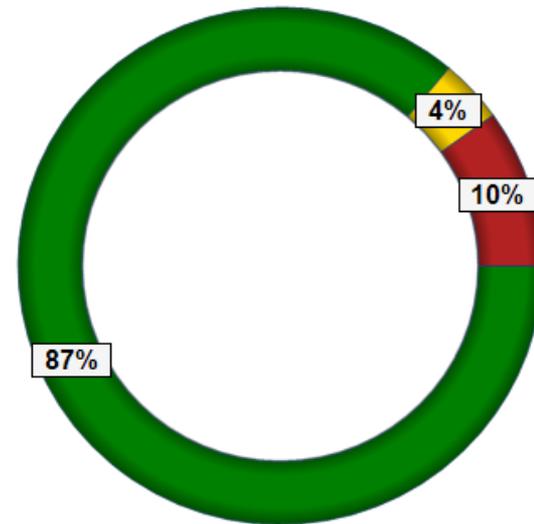
# STORAGE AND HANDLING-VFC REQUIREMENT

- ✘ Starting January 1, 2017 (if you are not already doing this)
- ✘ Data-loggers are required for VFC Providers
- ✘ Currently there is not funding to provide data-loggers to VFC providers
- ✘ Remember to chart Min/Max temperatures each morning



## ENROLLED PROVIDERS WITH DATA LOGGER(S) AS OF LAST VISIT

Total # Enrolled Providers With a Visit in PEAR=1238



-  All thermometers assessed were data loggers
-  One or more (but not all) thermometers assessed were data loggers
-  None of the thermometers assessed were data loggers

\*Effective 2017 Data loggers required in ALL storage units

# STORAGE AND HANDLING-VFC REQUIREMENT

- × What to do if you are missing a temperature reading
- × Download the data logger
  - + Document min/max temperature
  - + Verify not out of range



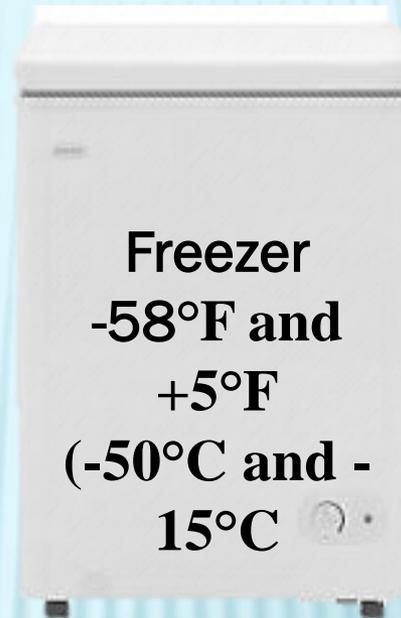
Do not fill in missing entry (S/H toolkit pg. 25)

Document actions taken

Save downloaded data and document

\*For VFC providers a missed entry is not a corrective action, if the above supporting documentation is available

# New Temperature Recommendations



## Why the change in refrigerated temperatures?

- Aligns better with the Celsius scale and guidance from the United States Pharmacopeia
  - 2 °C = 35.6 °F round up to 36 °F
  - 8 °C = 46.4 °F round down to 46 °F

# CHANGES TO HPV SCHEDULE

- × ACIP voted to approve the 2 dose schedule in October
- × VFC Resolution to include new schedule has been published
- × Still waiting for the publication of the MMWR
- × MCIR will update the assessment once the recommendations are in print

# 2 DOSE VS. 3 DOSE HPV SCHEDULE

- × Duration of protection is important
  - + Why? because HPV is targeting young adolescents who will need protection through many years of sexual activity
- × What we know:
  - + Studies have shown antibody responses maintained over time after a 3-dose schedule
    - × Data available through approximately 10 years (2vHPV and 4vHPV)
  - + Studies showed similar outcomes for a 2-dose schedule in adolescents compared to 3 doses if longer intervals maintained
    - × Longer interval (0, 6 months)



# PROPOSED HPV RECOMMENDATIONS

- × ACIP recommends routine HPV vaccination at age 11 or 12 years\*
  - + Females through 26 years & males through 21 years not previously vaccinated recommended
    - × Males 22-26 years of age in a high risk group
- × 2-dose schedule proposed:
  - + Dose 2 should be administered **6 to 12 months** after the first dose
  - + If vaccination series initiated before the 15<sup>th</sup> birthday, 2 doses of HPV vaccine recommended
    - × Dose 2 should be administered 6 to 12 months after the first dose
  - + If vaccination series initiated after the 15<sup>th</sup> birthday, 3 doses of HPV vaccine recommended
    - × 0, 1-2, and 6 months schedule

\*Vaccination series can be started at age 9 years, recommended schedule is a 3-dose series given (0, 1-2, 6 months)

# MENINGOCOCCAL AND HIV INFECTED PERSONS

- × Approximately **1 million** persons living with HIV in US
  - + 40,000 new infections annually
- × Evidence demonstrates an increased risk of meningococcal disease among HIV-infected persons
  - + Between 5 to 24 fold increased risk for meningococcal disease
  - + In HIV-infected persons, risk primarily due to serogroups C, W, and Y
- × Risk is life-long, thus boosters required

# MENINGOCOCCAL ACIP VOTE

- × June 2016 ACIP had a vote regarding HIV-infected persons
  - + HIV-infected persons age 2 months and older should routinely receive conjugate MenACWY vaccine
  - + Primary schedule depends on age
    - × Less than 2 years of age
    - × Greater than 2 years of age
- × Will require lifetime boosters
- × VFC resolution available:  
<http://www.cdc.gov/vaccines/programs/vfc/providers/resolutions.html>

**\*\*The MMWR published November 4<sup>th</sup>, 2016:**

<http://www.cdc.gov/mmwr/volumes/65/wr/mm6543a3.htm>

# ZOSTAVAX-MI-VRP PROGRAM

- × Zostavax is available through the MI-VRP program @ Kalamazoo County (Immunization Clinic)
- × \$23 administration fee
- ×  $\geq$  60 years
- × No insurance or no insurance coverage for the vaccine
- × Walk-ins welcome

# MI-VRP VACCINES AVAILABLE AT KALAMAZOO COUNTY

---

- × Tdap or Td
- × MMR: born on or after 1/1/57
- × Hep A: household contact, MSM, acute or chronic liver disease, injecting drug or non-injecting meth user, travel or work in endemic country, anticipate close contact with foreign adoptee during first 60 days of arrival (coming from endemic country)

# MI-VRP AVAILABLE AT KALAMAZOO COUNTY

- × Hep B: household contact, multiple sex partners, person seeking Rx for STD, MSM, current or recent injection-drug user, end stage renal disease, acute or chronic liver disease, diabetes, HIV
- × HPV: 19-26
- × PPSV23: 19-64 with asthma or smoker,  $\geq 65$
- × PCV13: CSF leak, cochlear implant, functional or anatomic asplenia, immunocompromised, corticosteroids or radiation therapy, solid organ transplant,  $>65$  who never received one dose

# VFC SHIPPING DAYS-BLACK OUT DAYS

- ✘ McKesson and Merck will NOT make VFC deliveries on the following dates :
- ✘ December 19<sup>th</sup> through January 2<sup>nd</sup>
- ✘ VFC deliveries will resume on Tuesday, January 3, 2017.
- ✘ If you haven't placed an order for December it is possible it will be held (at the state)until after the holiday
- ✘ I will send all orders to the state as I receive them, they will be held in cue and processed after the holiday



# VFC ORDERING CONTINUED

- × New for VFC orders
- × You may place orders more frequently than monthly
- × Must balance each time you order
- × Small inventories help reduce wastage and expiration



# VFC-VACCINE ORDERING



- ✘ You may order single doses of DT (with MDHHS approval), pediatric Td, and pediatric PPSV23, instead of the 10-dose minimum order size. 6" x 8" Amber bags are used to deliver repackaged vaccines. Since these repackaged vaccines come directly from the Distributor, these bags can count as original packaging. These bags offer protection for light-sensitive vaccines. Vaccine should remain in these bags during storage in the refrigerator until ready to be administered

# VACCINE LOSS & WASTAGE REPORTING IN MCIR



- Transactions are still wacky
  - Remember that you must use the Non-Return, Open MDV transaction for non-viable, open multi-dose vial product, no matter what the loss is
  - LOST transactions should not be used for vaccine that is non-viable due to temperature excursions, failure to store properly or expired vaccine – only for lost and cannot be found vaccine
- Educate providers on entering an Action Plan
  - The transaction indicates what happened. The Action Plan should indicate how they will avoid this loss in the future.

# VACCINE LOSS & WASTAGE REPORTING IN MCIR CONTINUED

Report Date: 09/12/2016 MDHHS Submit Date: Notification Date:

Action Plan: wasted and unable to use



<input checked="" type="checkbox"/>	08/17/2016	VARIVAX	NDC: 0006-4827-00	Quantity: 1			
	Note: wasted, drawn and unable to use						
	Dose Size	Inventory Effect	Transaction Id	VFC Code	State	Reason	Opt Out Flag
	0	-1	46401827		Reconciled	Drawn	Not Used N
<input checked="" type="checkbox"/>	08/17/2016	VARIVAX	NDC: 0006-4827-00	Quantity: 1			
	Note: wasted, drawn and unable to use						
<input checked="" type="checkbox"/>	08/22/2016	INFANRIX	NDC: 58160-810-52	Quantity: 1			
	Note: wasted, drawn and unable to use						

Cancel Submit

- ✘ The MCIR transaction tells what happened. The Action Plan should show how the provider will avoid this type of loss in the future. This is an example of what happened, not how to prevent.

# VACCINE LOSS & WASTAGE REPORTING IN MCIR CONTINUED

Report Date: 09/13/2016 MDHHS Submit Date:		Notification Date:					
<b>Action Plan</b> Due to busy month with back to school several instances of clients unable to wait and leaving without being seen. Goal: Continue to improve communication between client and provider.  Continue to improve quality control practices while drawing up and giving vaccines to avoid wasted doses.							
<input checked="" type="checkbox"/>	09/01/2016	ADACEL	NDC: 49281-400-10	Quantity: 1			
Note: Syringe fell on floor uncapped							
<input checked="" type="checkbox"/>	08/05/2016	ADACEL	NDC: 49281-400-10	Quantity: 1			
Note:							
	Dose Size	Inventory Effect	Transaction Id	VFC Code	State	Reason	Opt Out Flag
	0	-1	46202443		Reconciled	Drawn Not Used	N
<input checked="" type="checkbox"/>	08/25/2016	ADACEL	NDC: 49281-400-10	Quantity: 1			
Note:							

- Provides a plan of action on how they will avoid this type of loss in the future.



# SHIPPING LABELS TO RETURN VACCINE

- ✘ Return labels are emailed from **McKesson** to the VFC Primary Contact as stated under the VFC Enrollment tab in MCIR
- ✘ Return labels expire after 30 days
- ✘ If a provider states they never received the label and they have checked their inbox and spam/junk folders, ensure their email address is correct in MCIR and send an email outlining this information to MDHHS
- ✘ In order to re-send the label to a new contact, or because it expired, the report has to be voided in VTrckS and manually re-entered



# VFC SITE VISITS AND CONTRACTS

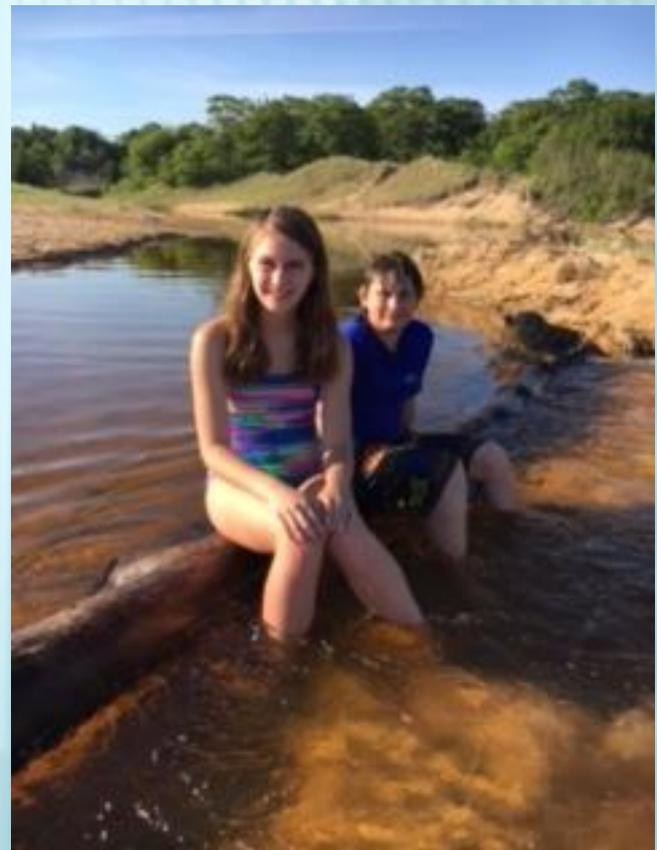
- ✘ Contracts will be completed on-line through the MCIR system the beginning of 2017 (same as last year)
- ✘ Instructions will be sent via e-mail and fax
- ✘ Site visits will not start until May 2017-the CDC is changing it's cycle to eventually be July to June
- ✘ Transition will be 2017 to 2018
- ✘ Site visits will start (2017) as soon as State and local health department staff are trained-training should be completed late April



# QUESTIONS?



# THANK YOU!



# Immunize Kalamazoo HCS Disease Surveillance Update December 8, 2016

---

MIKE PHILLIPS, RN

# 2016-2017 *Influenza* season

---

**Michigan Influenza Activity Level through 11/26/2016:**

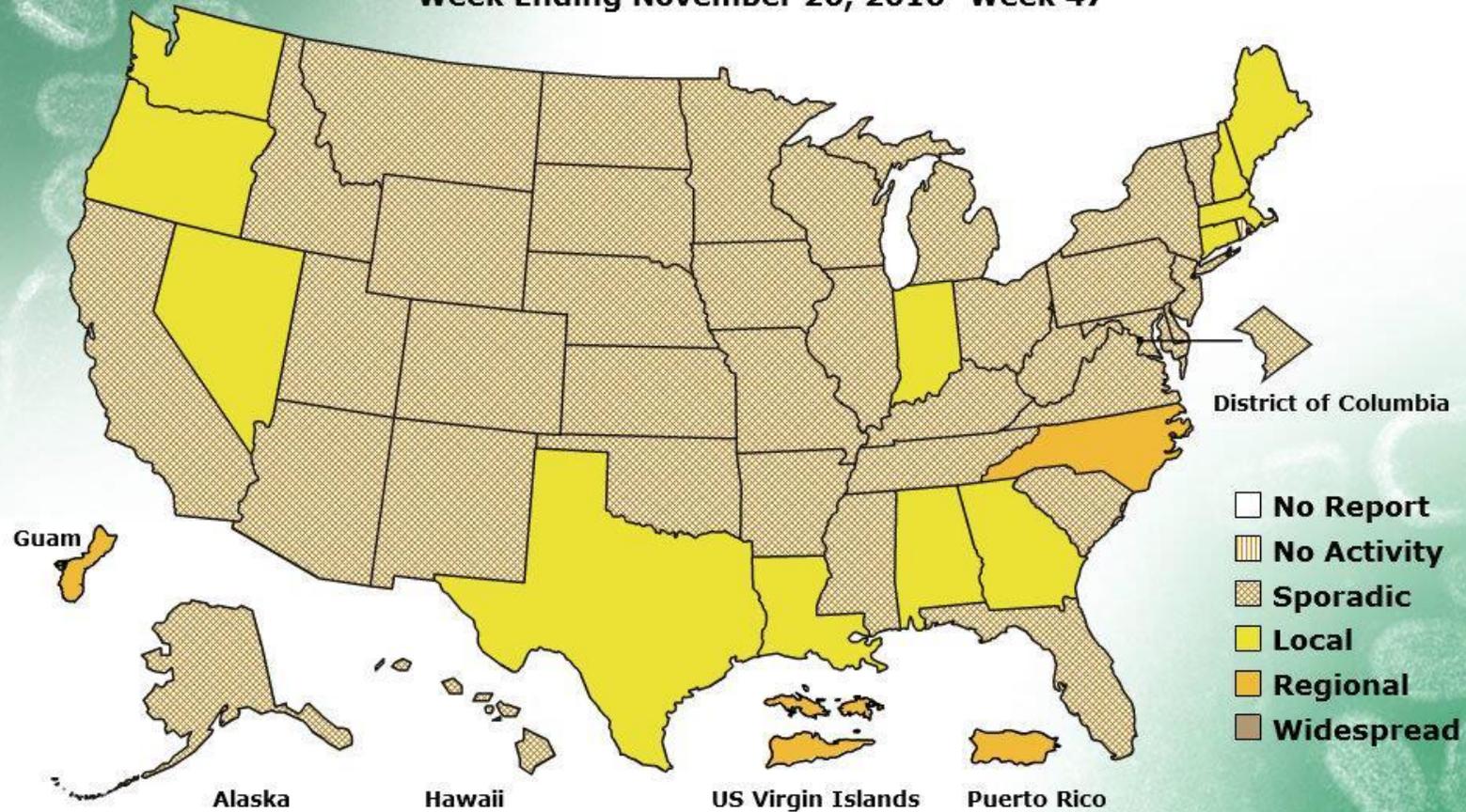
*No Report*    *No Activity*    ***Sporadic***    *Local*    *Regional*    *Widespread*

# FLUVIEW



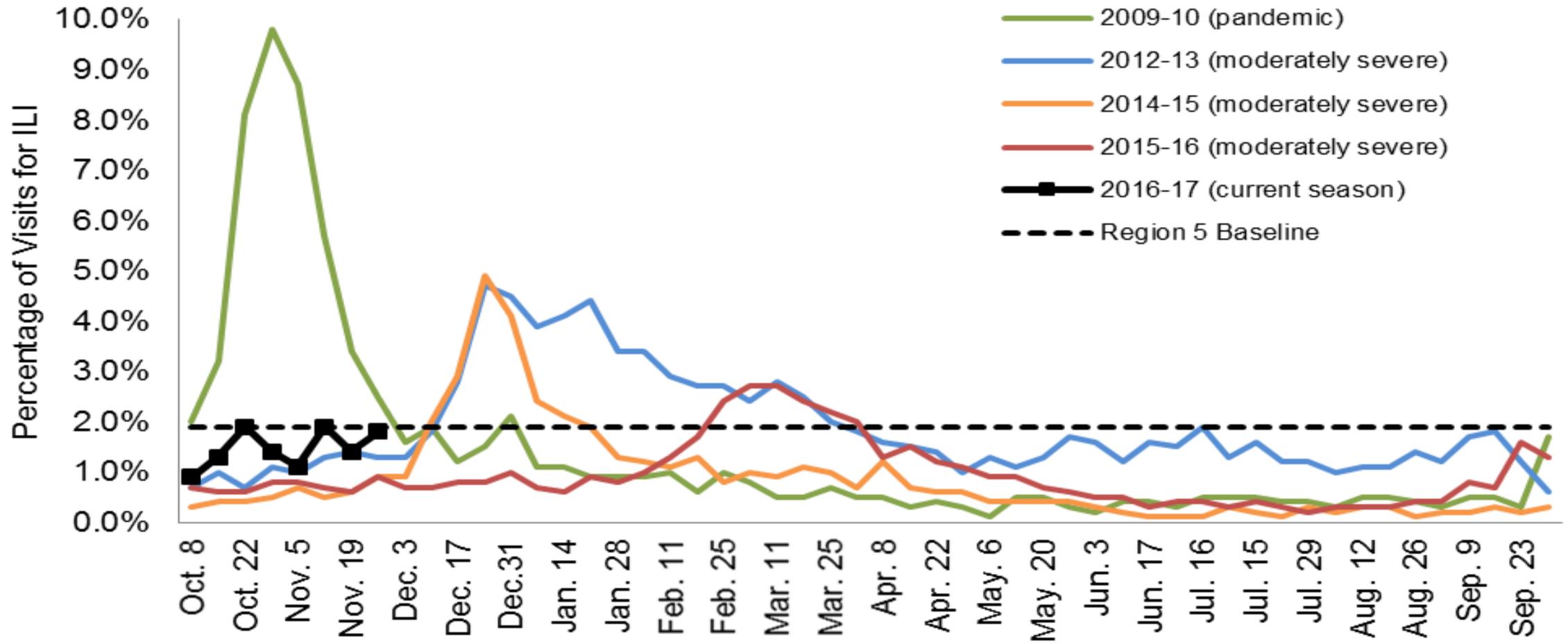
A Weekly Influenza Surveillance Report Prepared by the Influenza Division  
Weekly Influenza Activity Estimates Reported by State and Territorial Epidemiologists\*

Week Ending November 26, 2016- Week 47



\*This map indicates geographic spread and does not measure the severity of influenza activity.

## Percentage of Visits for Influenza-like Illness (ILI) Reported by the US Outpatient Influenza-like Illness Surveillance Network (ILINet): Michigan, Select Seasons



## *Influenza* continued

---

(from the 10/2016 HCS Health Advisory)

Clinicians are reminded to provide antiviral treatment for all severely ill and high-risk patients as soon as possible if influenza is suspected or confirmed... Please do not wait for laboratory confirmation if empiric antiviral therapy is warranted.

Most patients with severe viral respiratory illness are unvaccinated. Clinicians are urged to continue vaccinating patients.

# *Legionella*

---

- Gram-negative, non-spore forming, rod-shaped aerobic bacilli
- Illness is characterized by fever, myalgia, cough, and clinical or radiographic pneumonia
- People are exposed when they breathe in small water droplets containing the bacteria; **generally it does not spread person-to-person**
- Most healthy people do not become infected with *Legionella* after exposure. People at higher risk of illness are older; current or former smokers; people with chronic lung disease; people with weakened immune systems
- Nearly all cases are identified by urinary antigen testing. Both Borgess and Bronson labs test 300-500 submitted specimens annually

# Kalamazoo County *Legionella* Surveillance

---

## 5 Year Disease Case Count (through 12/06/2016)

<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>
4	1	1	4	9

## Public Health Epidemiology

- Last case this year was reported on October 3rd
- 3 of the 9 cases were exposed outside of state/county; 8 of 9 cases had significant co-morbidities (CV/lung disease, DM, cancer)
- Cases are not epi-linked having occurred sporadically in time and not associated with any specific location: 4 women, 5 men; ages range from 47 to 83, with a mean age of 74
- 10/16/2016: HCS issued a *Health Advisory* to all area physicians and health care providers to consider this disease when evaluating severe respiratory infection

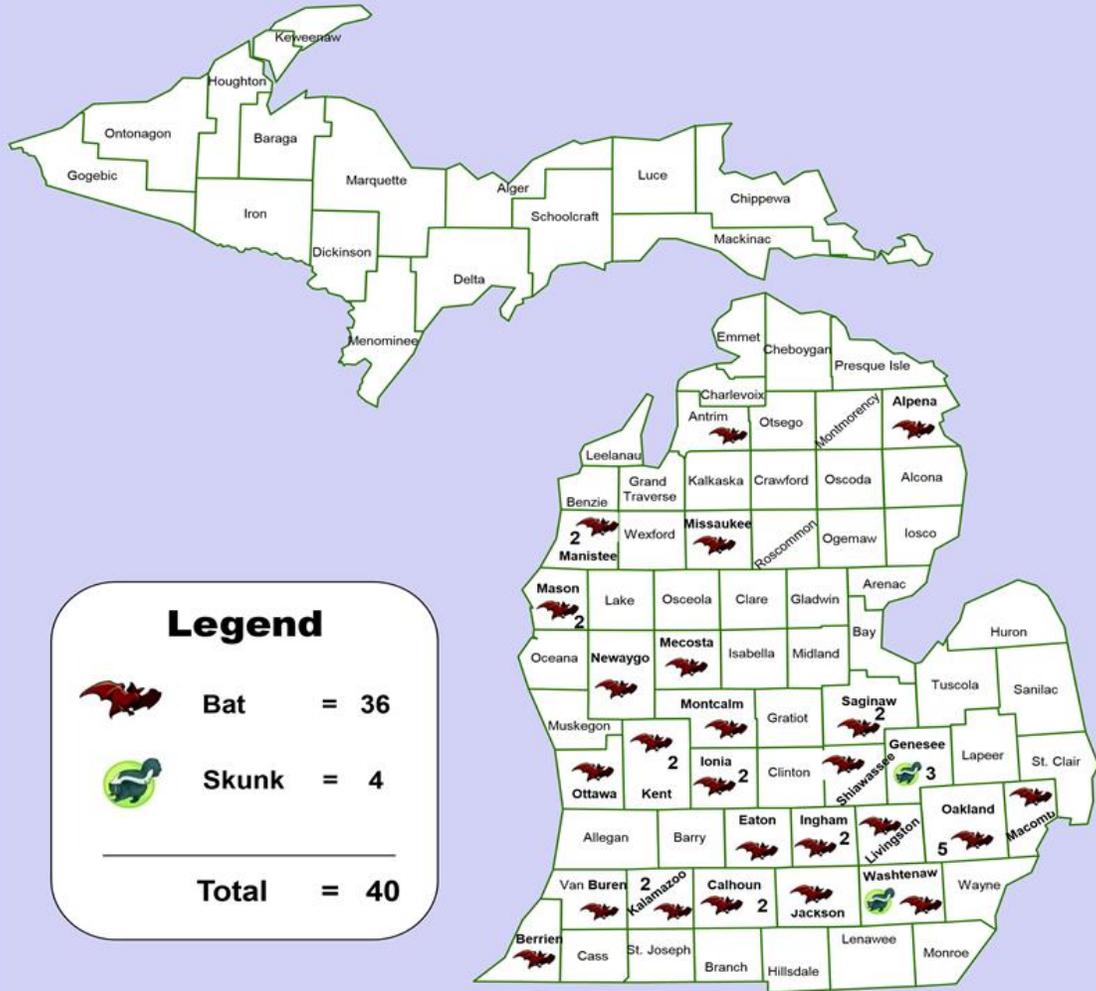
# Rabies

---

- State Bureau of Labs (MDHHS BOL) tests upwards of 3,000 animal specimens every year (bats, skunks, foxes, raccoons, dogs, cats, horses, et al)
- In mid-June, Kalamazoo County had its first lab-confirmed rabid bat since 2013. A second rabid bat was identified in August; Only a very small % of bats ever carry the disease
- Human rabies fatality remains very low—typically less than 6 cases annually in the United States. The 5-dose schedule (one HRIG/4 PEP vaccine series over 2-weeks) remains widely available—that along with local public health efforts insure prevention
- Most human rabies deaths are attributable to bats
- Those rare individuals that die from the disease are either unaware of exposure, or else fail to seek medical care after being scratched or bitten. The last case of human rabies in Michigan was in 2009

# - 2016 - Rabies Positive Animals in Michigan

as of November 30, 2016

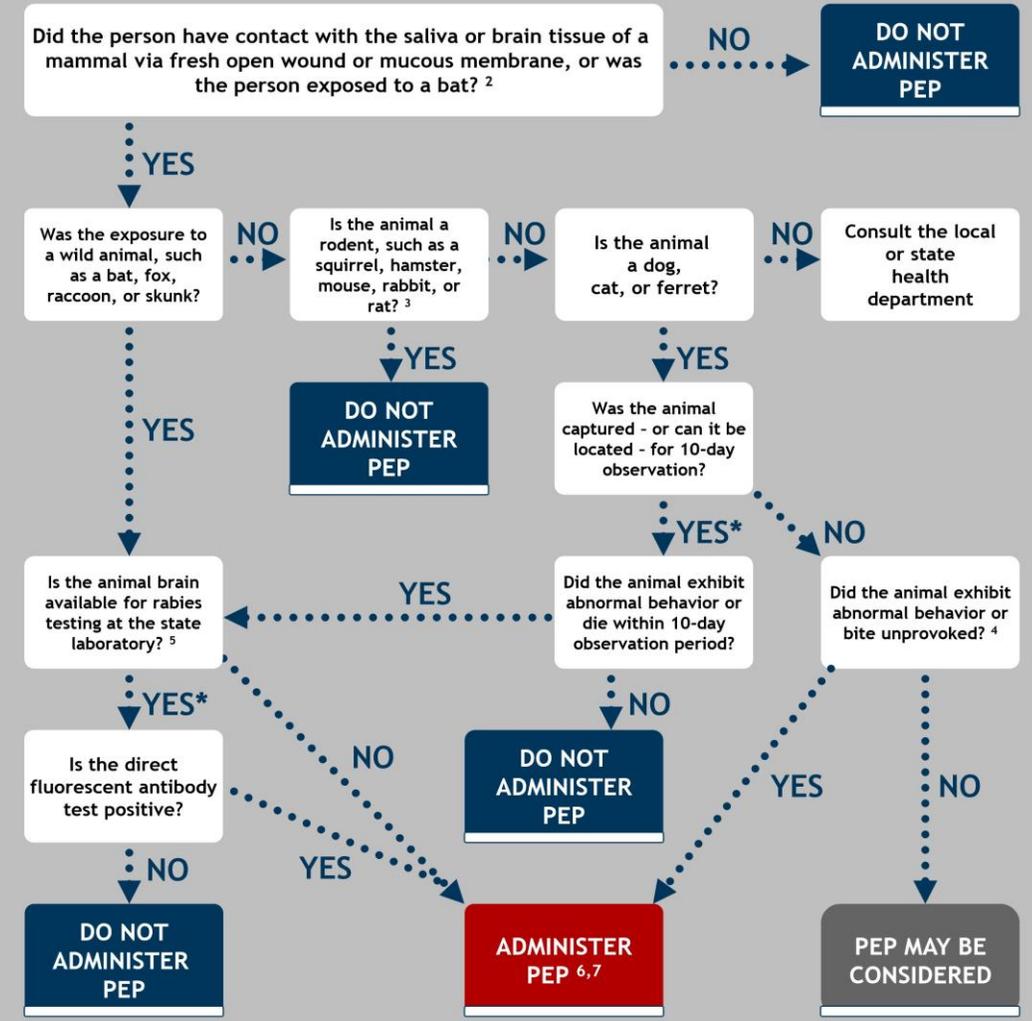


In 2015, 33 bats, 1 fox, and 1 skunk tested positive for rabies.  
Learn more about rabies in Michigan at [www.michigan.gov/rabies](http://www.michigan.gov/rabies)

## MICHIGAN RABIES ASSESSMENT: WHEN A PERSON HAS BEEN EXPOSED <sup>1</sup>

Immediately consult with local or state public health officials

Michigan law requires that animal bites be immediately reported to the local health department



\* Rabies PEP is a medical urgency, NOT an emergency. The decision to initiate rabies PEP can normally wait to determine whether an animal is available for testing or observation, and for test results to become available. Testing is available at the MDHHS laboratory 24/7 including weekends and holidays; turnaround time for testing and results is normally 24-48 hours.

SEE IMPORTANT INFORMATION ON REVERSE SIDE



# Kalamazoo County Select Table of Diseases for Past 5 Years

(through 12/06/2016)

---

<b>Disease</b>	<b><u>2012</u></b>	<b><u>2013</u></b>	<b><u>2014</u></b>	<b><u>2015</u></b>	<b><u>2016</u></b>
<i>Campylobacter</i>	25	36	14	40	39
<i>Salmonellosis</i>	40	29	37	29	22
<i>Shigellosis</i>	2	3	102	5	12
Meningococcal Dis	0	1	0	1	0
H. influenza	0	2	4	5	7
Pertussis	41	19	49	11	9

Select Table of Diseases continued

---

	<b><u>2012</u></b>	<b><u>2013</u></b>	<b><u>2014</u></b>	<b><u>2015</u></b>	<b><u>2016</u></b>
Lyme Disease	2	4	2	7	14
West Nile Virus	1	0	0	0	1
Zika	0	0	0	0	6
HBV, chronic	21	15	17	19	10
HCV, chronic	130	106	110	110	182

(source MDSS)

Report 8: Epi-Curve Graph

Report generated: 12-07-2016

Time Period: 01/01/2015 - 12/07/2016

Time Breakdown: by Month

Reportable Condition: Campylobacter

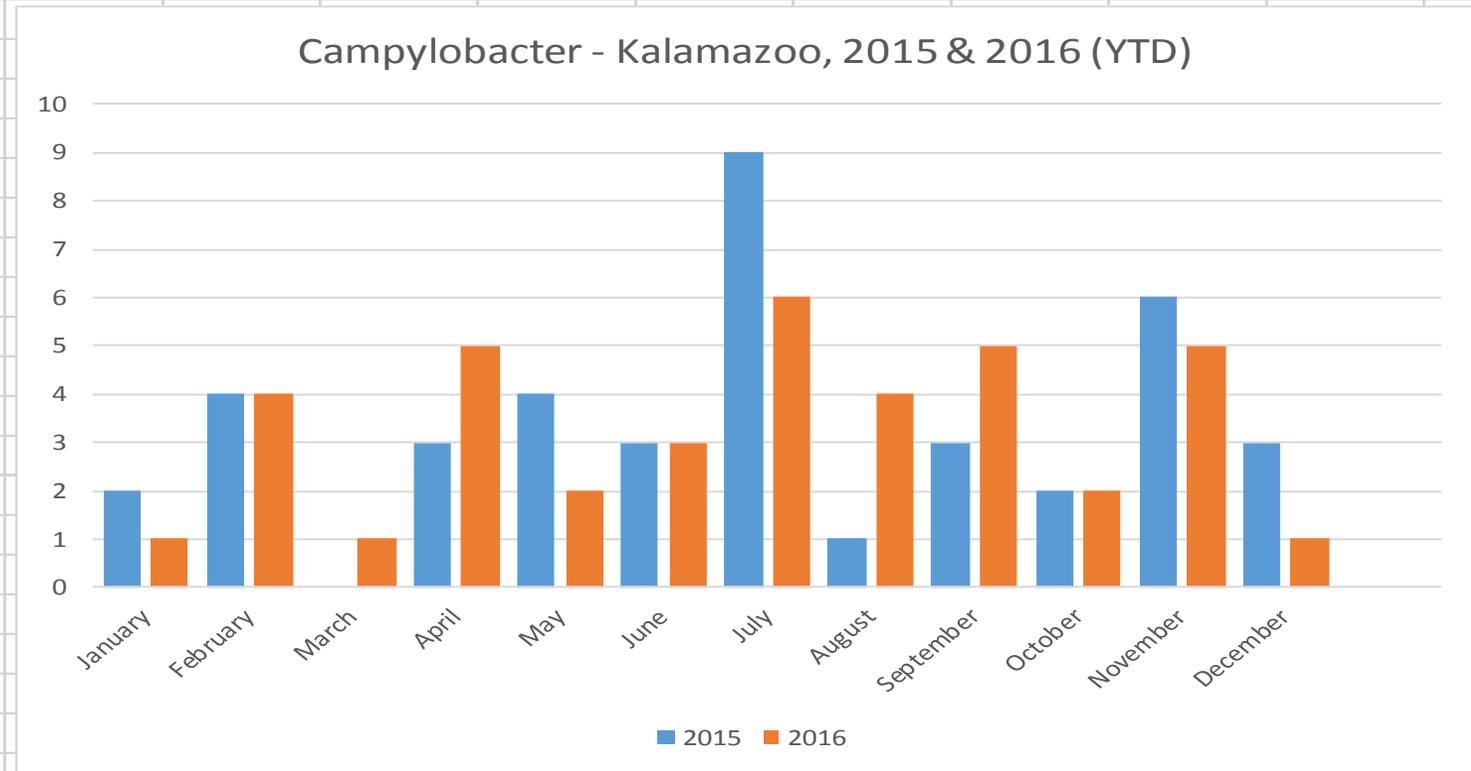
Counties: Kalamazoo

Case Status: Confirmed, Probable, Suspect, Unknown

Investigation Status: Active, Completed, Completed - Follow Up, New, Review

Case Types: Individual and Aggregate

Month	2015	2016
January	2	1
February	4	4
March	0	1
April	3	5
May	4	2
June	3	3
July	9	6
August	1	4
September	3	5
October	2	2
November	6	5
December	3	1



---

*Thank you*  
*HCS Disease Surveillance*  
**269-373-5267**



Please visit our website for more tips on MCIR: [Mcir.org/region-2/](https://Mcir.org/region-2/)

# How to Give Shots to Kids



**“Don’t think of it as getting a flu shot.  
Think of it as installing virus protection software.”**

---

Reprinted from The Funny Times / PO Box 18530 / Cleveland Heights, OH 44118  
phone: (216) 371-8600 / e-mail: [ft@funnytimes.com](mailto:ft@funnytimes.com)



Person

[Add/Find](#)  
[Roster](#)

Reminder/Recall

[Create Reminder](#)  
[Create Recall](#)  
[Retrieve/Confirm Results](#)  
[Scan RTS Letters](#)

Vaccine Mgmt

[Manage Inventory](#)  
[Return/Waste Reporting](#)  
[View Inventory History](#)  
[Vaccines Administered](#)

My Site

[Site Preferences](#)  
[User Preferences](#)  
[Edit My Site](#)  
[View My Site List](#)  
[Go to New Site](#)

Administration

[Add/Find User](#)  
[Site Users](#)

Reports

[AFIX](#)  
[Batch](#)  
[Inventory](#)  
[Profile](#)  
[Reminder/Recall](#)  
[Retrieve Results](#)  
[Roster](#)  
[Transfer](#)  
[Vaccine](#)  
[VAERS](#)

Other

[Get News](#)  
[View Usage Agreement](#)  
[MCIR.org](#)  
[VTS](#)  
[IVEN](#)  
[Exit Application](#)



## How to Find Patients Who Need Immunizations

### Print a Profile Report

First, log into MCIR. You'll be on your home screen.

Under Reports, click on Profile.

Person	Rem/Rcl	VIM	VFC	My Site	Adm	Rpts	Oth		
AFIX	Batch	Inv	Profile	Rem/Rcl	Retrieve Results	Roster	Transfer	Vac	VAERS

Report Parameters	
Report	Current Immunization Profile by Provider ID
People of age at least (months)	24
but not yet of age (months)	36
Minimum Doses of DTaP/DT/Td/Tdap	4
Minimum Doses of Tdap	0
Minimum Doses of IPV	3
Minimum Doses of MMR	1
Minimum Doses of HIB	3
Minimum Doses of HepB	3
Minimum Doses of Varicella	1
Minimum Doses of PCV7/13 (Pevnar)	4
Minimum Doses of HepA	2
Minimum Doses of Rotavirus	0
Minimum Doses of Influenza	0
Minimum Doses of Meningococcal	0
Minimum Doses of HPV	0
Gender	All
Patient Status	Standard
Migrant People	Exclude
List People Not Meeting Criteria	Yes
Display People As	<input checked="" type="radio"/> List <input type="radio"/> 1 Page - Official State of Mich Imms Record without address
Description	PRF_1476883645592

<b>Additional Info</b>
Runs: Immediately, Kept 10 days
Generates clinic assessments of people
attached to MICHIR provider ID. The
parameters for age series are set
by the end user.

3. Drop down to "Current Immunization Profile by Provider ID."

4. Set criteria and List People Not Meeting Criteria.

5. Click Submit. Go to Reports /Retrieve Results.

**Immunization Schedule Specified for Clients**

People of age at least (months)	24
but not yet of age (months)	36
Minimum Doses of DTaP/DT/Td/Tdap	4
Minimum Doses of IPV	3
Minimum Doses of MMR	1
Minimum Doses of HIB	3
Minimum Doses of HepB	3
Minimum Doses of Varicella	1
Minimum Doses of PCV7/13 (Pevnar)	4
Minimum Doses of HepA	2
Minimum Doses of Rotavirus	0
Minimum Doses of Influenza	0
Minimum Doses of Meningococcal	0
Minimum Doses of HPV	0
Gender	All
Patient Status	Standard
Migrant People	Exclude

\*: People may be considered compliant for Hib and PCV7 even if they do not meet minimum number of doses stipulated if they are assessed as complete.

**SUMMARY**

	Number	Percent
Clients That Meet Above Criteria	188	85
Clients Not Meeting Above Criteria	34	15
Total Number of Clients Evaluated	222	100

Page 1 will show your criteria

It will show the Number and Percent for:

Clients That Meet Above Criteria

Clients Not Meeting Above Criteria

Total Number of Clients Evaluated.

**Page 2 will show your clients who haven't received all of their immunizations and their phone numbers if noted in MCIR.  
Now you have a list to contact your clients.**

12/01/2016  
Page: 2

**Current Immunization Profile by Provider ID**

**Listing of Clients Not Meeting Requirements**

<u>MCIR ID</u>	<u>Name</u>	<u>Birth Date</u>	<u>Phone Number</u>	<u>Patient ID</u>
12345678911	John Smith	01/01/2001	(123)456-7899	1234

## Reducing Duplicate Records

Duplicate records reduce the chance that patients receive needed shots.

\*Look up the MCIR record first. \* \_\_ \* Use the wildcard before and after unique characters from the first or last name.

Example: \*Lan\* for Landopholus.

### Having trouble finding someone's record?

\*Ask for the spelling of the name. Use wild cards to find the name quickly.

\*Ask "Do you have a previous last name?"

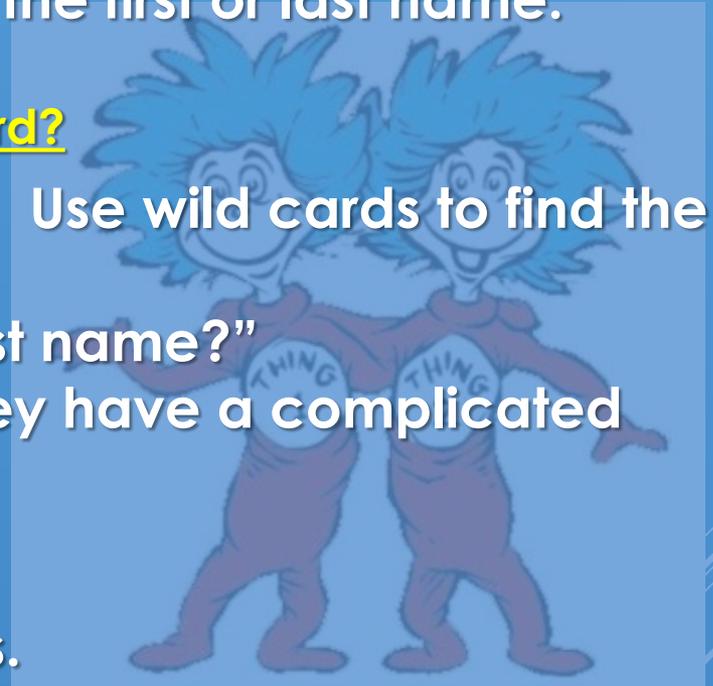
\*Ask people for their license if they have a complicated name.

### What if I come across duplicates?

\*Mark them in MCIR as duplicates.

\*Then email us only the correct MCIR ID and County of residence.

We'll merge the files.



## Finding Errors Quickly Using Ctrl F

**ESSR (Electronic Summary Submission Report)**

**Example: Lot not found in Inventory**

Find the patient connected to the error.

**How to copy the patient's ID from the electronic ESSR:**

- \* Highlight or double click the MCIR ID for the patient that's connected to this error. Right click and select Copy
- \* In MCIR, click on Person, then click on Add/Find.
- \* Right Click and select Paste in MCIR ID. Click Search

# Find Person

[Print Help](#)

[Home](#) [Exit](#)

<b>Person</b>	<b>Rem/Rcl</b>	<b>VIM</b>	<b>My Site</b>	<b>Adm</b>	<b>Rpts</b>	<b>Oth</b>
<a href="#">Add/Find</a> <a href="#">Roster</a>						

Before adding a person, please make several attempts to locate the person in the system.

*PLEASE NOTE:* At least one person name field and a birthdate are required to add a new record.

You may use any other field for identification purposes, but using these fields will not allow you to add a new record.

## This information identifies the person presenting for medical treatment

MCIR ID	<input type="text" value="16743074247"/>	<input type="text"/>	First Name	<input type="text"/>
Last Name	<input type="text"/>		Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Birthdate*	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> MultipleBirthChild	
Mother's Maiden Name	<input type="text"/>		Medicaid ID	<input type="text"/>
Patient ID	<input type="text"/>			
WIC ID	<input type="text"/>			

## Information identifying the responsible party for appointments (parent/guardian)

Last Name	<input type="text"/>	First Name	<input type="text"/>
Phone	( <input type="text"/> ) <input type="text"/> - <input type="text"/>		

<input type="button" value="Search"/>	<input type="button" value="Clear"/>	<input type="button" value="Cancel"/>
---------------------------------------	--------------------------------------	---------------------------------------

## General Information

Person: ZZZWoman, Wonder

Birth Date: 01/01/1960

Provider: **Overdue**

[Print Help](#)

[Home](#) [Exit](#)

[View](#)

Person	Rem/Rcl	VIM	My Site	Adm	Rpts	Oth
<a href="#">Add/Find</a>	<a href="#">Roster</a>	<a href="#">Add Imm</a>	<a href="#">Information</a>	<a href="#">Status</a>	<a href="#">History</a>	

Click on History



If this is not the correct person you may [Search Again](#).

## Person Information : [Edit](#)

MCIR ID : 16743074247

Name: ZZZWoman

Person: ZZZWoman, Wonder

Birth Date: 01/01/1960

Provider: **Overdue**

[Print Help](#)

[Home](#) [Exit](#)

[View](#)

Resp. Party: Woman,

Address: 12345 Not

Battle Cree

Country: United Stat

## Immunization History

Person	Rem/Rcl	VIM	My Site	Adm	Rpts	Oth
<a href="#">Add/Find</a>	<a href="#">Roster</a>	<a href="#">Add Imm</a>	<a href="#">Information</a>	<a href="#">Status</a>	<a href="#">History</a>	

## High Risk Condition:

Influenza Screening M

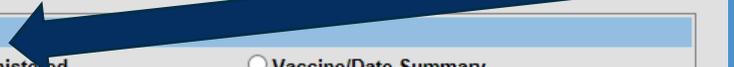
Pregnancy: [Add](#)

Series	Dose
DTP/DTaP/ DT/Td/Tdap	01/01/20 DTaP 56yrs exa
MMR	
Hepatitis B	
Varicella	
Hepatitis A	08/01/20 Hep A (p 56yrs 7m

## History Format

Vaccine Series     Date Administered     Vaccine/Date Summary

Date	Vaccine	Age	Entered By	Manufacturer	Lot #	
03/01/2014	IPV	54 Years 2 Months	MCIR Training Videos	sanofi	EXP0101SOON	
01/01/2016	DTaP	56 Years exactly	KCHD-Kent County School Nurses	Unknown		
05/01/2016	HPV9	56 Years 4 Months	MCIR Training Videos	Merck	IMALOTNUMBER25	
06/10/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE	
06/17/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE	<a href="#">Y</a>
08/01/2016	Hep A (ped)	56 Years 7 Months	KCHD-Kent County School Nurses	Unknown		
10/31/2016	Tdap	56 Years 9 Months	CSHS - Wyoming Community Health Center	Glaxo	123789	<a href="#">Delete</a>
11/10/2016	Infl IIV4 Ped (PF Inj)	56 Years 10 Months	CSHS - Wyoming Community Health Center	sanofi	UT5583JA	<a href="#">Delete</a>



On next screen, click Date Administered

Clicking on Date Administered will put the most recent shots at the bottom.

Click on the shot that was affected or you can go to the ESSR and copy the lot #. Then hit Ctrl F to bring up a search window Paste the lot # in the window. This will bring up the affected shot.

**Immunization History** [Print Help](#)  
[Home](#) [Exit](#)

Person: *Elizabeth, Wendy* Birth Date: 01/01/1960  
Provider: *Overdue* [View](#)

[Add/Find](#) [Roster](#) [Add Imm](#) [Information](#) [Status](#) [History](#)

MCIR ID: 16743074247

**History Format**

Vaccine Series     Date Administered     Vaccine/Date Summary

Date	Vaccine	Age	Entered By	Manufacturer	Lot #	
03/01/2014	IPV	54 Years 2 Months	MCIR Training Videos	sanofi	EXP0101SOON	
01/01/2016	DTaP	56 Years exactly	KCHD-Kent County School Nurses	Unknown		
05/01/2016	HPV9	56 Years 4 Months	MCIR Training Videos	Merck	IMALOTNUMBER25	
06/10/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE	
06/17/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE	
08/01/2016	Hep A (ped)	56 Years 7 Months	KCHD-Kent County School Nurses	Unknown		
10/31/2016	<u>Tdap</u>	56 Years 9 Months	CSHS - Wyoming Community Health Center	Glaxo	<b>123789</b>	<a href="#">Delete</a>
11/10/2016	<u>Infl IIV4 Ped (PF Inj)</u>	56 Years 10 Months	CSHS - Wyoming Community Health Center	sanofi	UT5583JA	<a href="#">Delete</a>

Find ✕

Find: 123789

Match whole word only     Match case

Highlight all matches

[Previous](#)    [Next](#)

# Immunization History

Person: ZZZwoman, wonder

Birth Date: 01/01/1960

Provider: Overdue

[Print Help](#)

[Home](#) [Exit](#)

[View](#)

Person	Rem/Rcl	VIM	My Site	Adm	Rpts	Oth
<a href="#">Add/Find</a>	<a href="#">Roster</a>	<a href="#">Add Imm</a>	<a href="#">Information</a>	<a href="#">Status</a>	<a href="#">History</a>	

MCIR ID: 16743074247

## History Format

<input type="radio"/> Vaccine Series		<input checked="" type="radio"/> Date Administered		<input type="radio"/> Vaccine/Date Summary	
Date	Vaccine	Age	Entered By	Manufacturer	Lot #
03/01/2014	IPV	54 Years 2 Months	MCIR Training Videos	sanofi	EXP0101SOON
01/01/2016	DTaP	56 Years exactly	KCHD-Kent County School Nurses	Unknown	
05/01/2016	HPV9	56 Years 4 Months	MCIR Training Videos		IMALOTNUMBER25
06/10/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE
06/17/2016	Infl LAIV4 (FluMist)	56 Years 5 Months	MCIR Training Videos	MedImmune	LOTNUMBERGOESHERE <span style="color: yellow;">Y</span>
08/01/2016	Hep A (ped)	56 Years 4 Months	KCHD-Kent County School Nurses	Unknown	
10/31/2016	<a href="#">Tdap</a>	56 Years 9 Months	CSHS - Wyoming Community Health Center	Glaxo	123789 <a href="#">Delete</a>
11/10/2016	<a href="#">Infl IIV4 Ped (PF Inj)</a>	56 Years 10 Months	CSHS - Wyoming Community Health Center	sanofi	UT5583JA <a href="#">Delete</a>

Non-Administrations/Titers	Date	Reason	Entered By	
<a href="#">Seasonal Influenza</a>	11/10/2016	Parent Refusal	MCIR Training Videos	<a href="#">Delete</a>
<a href="#">Varicella</a>	11/10/2016	Immunity	CSHS - Wyoming Community Health Center	<a href="#">Delete</a>

Antivirals/Antibiotics	Date	Disease
No antivirals/antibiotics given		

[Add to Roster](#) [Unlock Person](#)

Click on the shot to bring up the screen where you can edit the information.

## Edit Immunization History

Person: ZZZWoman, Wonder

Birth Date: 01/01/1960

Provider: **Overdue**

[Print Help](#)

[Home](#) [Exit](#)

**View**

<b>Person</b>	<b>Rem/Rcl</b>	<b>VIM</b>	<b>My Site</b>	<b>Adm</b>	<b>Rpts</b>	<b>Oth</b>
<a href="#">Add/Find</a>	<a href="#">Roster</a>	<a href="#">Add Imm</a>	<a href="#">Information</a>	<a href="#">Status</a>	<a href="#">History</a>	

### Vaccine Details

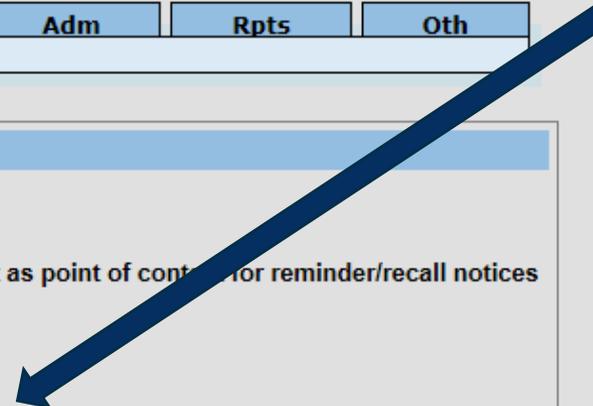
Provider	CSHS - Wyoming Community Health Center		
Date Administered*	<input type="text" value="10/31/2016"/>	<input checked="" type="checkbox"/>	List as point of contact for reminder/recall notices
Vaccine*	<input type="text" value="Tdap (adol/adult)"/>		
Mfr (Product)*	<input type="text" value="Glaxo (BOOSTRIX)"/>		
Lot Number	<input type="text"/>	<b>Select Active Lot</b>	
Vaccine Eligibility*	<input type="text" value="Private Pay/Insurance"/>	Dose Qty (ml)*	<input type="text" value="0"/>
Site on Body	<input type="text"/>	Route	<input type="text"/>

### Additional Info

Client Used	Provider Thin Client	Record Status	approved for provider use
Created By	vansingelj2016 on 11/11/2016	Modified By	

All fields marked with \* are mandatory

Click on  
Select  
Active Lot



## Edit Immunization History

Person: ZZZWoman, Wonder

Birth Date: 01/01/1960

Provider: **Overdue**

[Print Help](#)

[View](#)

[Home](#) [Exit](#)

<b>Person</b>	<b>Rem/Rcl</b>	<b>VIM</b>	<b>My Site</b>	<b>Adm</b>	<b>Rpts</b>	<b>Oth</b>
<a href="#">Add/Find</a>	<a href="#">Roster</a>	<a href="#">Add Imm</a>	<a href="#">Information</a>	<a href="#">Status</a>	<a href="#">History</a>	

### Vaccine Details

Provider	CSHS - Wyoming Community Health Center	
Date Administered*	<input type="text" value="10/31/2016"/>	<input checked="" type="checkbox"/> List as primary contact for reminder/recall notices
Vaccine*	<input type="text" value="Tdap (adol/adult)"/>	
Mfr (Product)*	<input type="text" value="Glaxo (BOOSTRIX)"/>	
Lot Number	<input type="text" value="EC9A9* (Expires: 01/22/2019)"/> <input type="text" value="H549F (Expires: 10/30/2017)"/> <input type="text" value="9ZS2S (Expires: 02/11/2019)"/> <input type="text" value="EC9A9 (Expires: 01/22/2019)"/>	
Vaccine Eligibility*	<input type="text" value=""/>	
Site on Body	<input type="text" value=""/>	
<b>Enter Lot Manually</b>		
Dose Qty (ml)*	<input type="text" value="0"/>	
Route	<input type="text" value=""/>	

### Additional Info

Client Used	Provider Thin Client	Record Status	approved for provider use
Created By	vansingelj2016 on 11/11/2016	Modified By	

All fields marked with \* are mandatory

Choose the dropdown for the correct lot # and click Submit.

You want to select the dropdown rather than entering it manually.

Selecting the dropdown is quicker with less likelihood of a mistake.

Sometimes a Lot that's entered manually won't go through to MCIR

You can use Ctrl F in:

MCIR screens

Tip Sheets

ESSRs and other reports

Some websites

Excel spreadsheets

PDFs



See how many ways you can use Ctrl F and copy / paste with the mouse. Once you get used to it, you'll do your work much faster.

**Thanks for your time and everything that you do.**

Please visit our website for more tips on MCIR: [Mcir.org/region-2/](http://Mcir.org/region-2/)

**For specific questions, contact our Help Desk at 888-217-3901 or [mcirhelp@kalcounty.com](mailto:mcirhelp@kalcounty.com)**

**Or contact me at 269-373-5079 or [warich@kalcounty.com](mailto:warich@kalcounty.com)**

**Thanks again— Bill Richter**

**Does anyone have any questions?**