



Department of Human Services

Incorporating: Health, Community Services, Housing and Senior Victorians

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Immunisation Program Newsletter Issue 2 - September 2002

Meningococcal serogroup C Update

Listed are recent statistics on meningococcal disease cases in Victoria for this year and a comparison to this time last year and end of 2001.

| Serogroup | Cases | | |
|------------------|------------|------------|------------|
| | 2002 | 2001 | 2001 |
| | ytd | ytd | total |
| Serogroup B | 37 | 30 | 47 |
| Serogroup C | 50 | 38 | 56 |
| Other serogroups | 5 | 1 | 2 |
| Clinical/waiting | 46 | 33 | 59 |
| Total | 138 | 103 | 165 |
| Deaths | 5 | 7 | 11 |

Information supplied by Communicable Diseases Unit of the Department of Human Services.

Meningococcal serogroup C conjugate vaccines

The Therapeutic Goods Administration (TGA) has approved 2 more conjugate type vaccines against meningococcal serogroup C bacteria. This means

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there are now 3 appropriate vaccines for infants from 6 weeks of age to adulthood that at this point in time will provide long lasting protection against meningococcal serogroup C disease.

The vaccines are:

Meningitec (Wyeth Australia)

NeisVac-C (Baxter Healthcare)

Menjugate (Chiron/CSL)

Supplies of Meningitec vaccine are intermittent with small quantities reaching providers as per orders. NeisVac-C currently has supplies of the vaccine available. Menjugate vaccine should be available later this year.

The Federal Government has approved a national meningococcal serogroup C immunisation program starting in 2003 using conjugate vaccine. The vaccines will be provided to children 12 months of age along with their routine immunisations at 12 months. It will also be provided to all 15 year olds as part of the Year 10 secondary School Immunisation Program. 16 and 17 year olds will also be provided with the immunisation in 2003.

To assist you with frequently asked questions (FAQ's) that are being asked about meningococcal vaccines, included in this newsletter are [FAQ's for conjugate meningococcal vaccine](#) and answers.



Interpreting Service

All General Practitioners are able to access a telephone interpreting service by calling the Doctor's Priority Line on **1300 131 450**, 24 hours per day, 7 days per week for the cost of a local call. A Medicare provider number is required. For a free onsite interpreter, you need to book in writing and fax to 1300 654 151 and provide 2 weeks notice. On site interpreters can be booked for a visit between 8am and 6pm Monday to Friday. Urgent cases and out of hours service is considered case by case.

Other Immunisation providers can call **131 450** and a fee of \$21.70 per 15 minutes or part thereof for telephone interpreting is charged.

When you need to clarify immunisation records from overseas clients, this service may be of assistance.

Standard Needle Sizes for Immunisation

The Australian Immunisation Handbook 7th Edition states: "Most vaccines should be injected deep into a muscle. The use of a short needle may lead to inadvertent SC injection and increase the risk of severe injection pain and local reactions.

The standard needle for administering intramuscular (IM) vaccines is 23 gauge and 25 mm in length.

The exceptions are:

1. Preterm babies 2 months or younger, or very small infants – use a 23 gauge 25mm or a 25 gauge 16mm needle;
2. IM injections in very obese adults use 23 gauge 38 mm needle."

For subcutaneous vaccination with vaccines eg Varicella, use a 25 gauge needle 16mm in length.

School Entry Immunisation Certificates (SEIC)

Did you know that authorised officers from Local Government are the only legal body able to provide

either a "Complete" or "Incomplete" SEIC for children starting school?

Unfortunately some primary schools are accepting other forms of immunisation information such as the ACIR Child History Statement or a certificate from the doctor. The SEIC is a legal document and as such can only be issued by an authorised Local Government officer.

For parents to obtain a "complete" SEIC for their child prior to starting primary school, the child will need to have completed all scheduled vaccines including the 4 year old boosters.

Parents will need to provide documented proof of immunisation by either:

- a) Written documentation from the Child Health Record book,
- b) An ACIR Immunisation History Statement,
- c) A history statement/Medical Declaration from the doctor, specifying each vaccine given.
- d) A signed Statutory Declaration stating, according to the parents belief, all appropriate vaccinations have been given.

An "incomplete" SEIC is issued for a child prior to starting school when vaccine doses have been forfeited due to "catch-up" immunisation schedules, or the parent is a conscientious objector to immunisation. In this circumstance, the parent provides local government with either:

- a) Written documentation from the Child Health Record book,
- b) An ACIR Immunisation History Statement,
- c) A history statement/Medical Declaration from the doctor, stating the child might suffer an adverse reaction,
- d) A signed Statutory Declaration stating that the parent has a conscientious objection to the child being immunised.

A parent can also provide a written Undertaking to have the child immunised within an agreed period. After an Undertaking is issued, arrangements should be made for the child to be immunised.

Local government keeps a copy of the Undertaking to follow-up.

Storage of Records

The local government requirement for keeping immunisation records comes under the authority of the Public Record Office Victoria: General Disposal Schedule.

The Health and Community Services Schedule 98/1, 12.5.1 states:

Function description: "The process of recording that a child has been immunised against particular infectious diseases.

Disposal Action: Destroy 25 years after date of immunisation.

Examples of Records: Immunisation cards."

If immunisation information has been entered electronically then hard copies of cards would not be required to be kept for 25 years.

Information from the Division of General Practice states that "inactive records' be kept for 7 years and 'active records' are maintained regardless of the date from when they commenced.

The Golden Rules of Immunisation continued....

The Australian Immunisation Handbook 7th Edition (page 247 to 250) lists 35 Golden Rules of Immunisation. As mentioned in the last newsletter, here are a few more Golden Rules for your interest.

Prior to vaccination

5. Ensure there are adequate trained staff, emergency equipment and drugs to deal with rare post-vaccination complications. It is important that the correct strength of adrenaline is kept close at hand in case of anaphylaxis.
6. Discuss the risks and benefits of immunisation and ensure that valid consent is obtained prior to immunisation.

7. Use the pre-vaccination questionnaire to help assess the child or adult's health status prior to vaccination.

Administration of vaccines

8. Administer all due vaccines on the same day, but give them in separate sites (i.e. Use different limbs) using separate syringes.
9. Check the expiry date of all vaccines prior to drawing up, and record the batch in the patient's records and the child's Personal Health Record.
10. Draw up vaccines using sterile technique.

Oral Polio vaccine (OPV)

There have been numerous calls with regard to reusing the OPV vial once it has been opened. It is an important time to reinforce the storage and handling of OPV as the price has increased from \$3.70 to \$7.00 per bottle of 10 doses (2 drops equals 1 dose). *The Australian Immunisation Handbook 7th Edition* (page 189 to 190) states reuse of OPV under the following conditions:

- The expiry date has not passed
- It has been stored under appropriate cold chain conditions (2°C to 8°C)
- Opened vials of OPV that have been taken out of the health care centre for out-reach vaccination activities are discarded at the end of the day.

Therefore the OPV vial once opened can be recapped and kept in the fridge until all 10 doses are used (within the use by date).

Vaccine Shortages

CSL has experienced a shortage of the tuberculin skin test Purified Protein Derivative (PPD). Supplies are now available.

ADT (Adult Diphtheria and Tetanus) Vaccine Recommendations

The Immunisation Program is funded to supply ADT vaccine for the following purposes:

- Year 10 secondary school ADT immunisation program.
- Catch-up immunisation for people over eight years of age that are behind in doses of diphtheria and tetanus.

Treatment of tetanus prone wounds and booster doses of ADT at age 50 years are **not** funded by the Immunisation Program. ADT vaccine is supplied through the "Doctor's Bag" order book from your pharmacy.

In the event of a tetanus-prone injury, a booster dose of tetanus containing vaccine should be given if five or more years have elapsed since the previous dose. See *The Australian 7th Edition Immunisation Handbook*, page 214 for tetanus prone injury guidelines.

Immunisation Calculator

The Immunisation Calculator website was out of order for a while recently however it is up and running again. Go to:

www.health.sa.gov.au/immunisationcalculator

If you have any questions about the calculator, click on the "feedback" button and you can email the Immunisation calculator staff.

Web Site Coming Soon

The Immunisation Program is developing an improved web site within the Victorian Government Public Health site. It will have a bright new look. The information will include immunisation fact sheets, other community language translations, and links to useful websites, resources, and previous newsletters.

We will keep you up to date with progress and if you have any suggestions please contact us (details at the end of this newsletter).

A Great Response

Thank you to everyone who responded about the number of copies of the immunisation newsletter that they would like to receive. It will take a short period of time to update our listing with your response. We hope to be able to complete your requests for the next newsletter. If you have not contacted us yet and would like to receive more than one newsletter, fax us on the [attached form](#).

For further information on the Immunisation Program:

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