NEW JERSEY
VACCINES FOR CHILDREN (VFC) NEWSLETTER
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NEW MINIMUM REFRIGERATOR STORAGE TEMPERATURE OF 36° FAHRENHEIT

The Centers for Disease Control and Prevention (CDC) has changed the temperature range for storing refrigerated vaccine for Fahrenheit temperatures from 35° F - 46° F to 36° F - 46° F. The Celsius temperature range remains 2° C - 8° C. This change is reflected in the CDC’s Vaccine Storage & Handling Toolkit. Frequently asked questions about this change are listed below:

Why is the CDC adjusting the recommended minimum Fahrenheit temperature for refrigerated vaccines from 35° F to 36° F?

The conversion of 2°- 8° Celsius equates to 35.6° - 46.4° Fahrenheit. Among routinely recommended vaccines, most manufacturers' package inserts note a Fahrenheit temperature range of 36° F - 46° F, while some note a temperature range of 35° F - 46° F.

By adjusting the Fahrenheit temperature range from 35° F - 46° F to 36° F - 46° F, the CDC is ensuring that the recommended Fahrenheit temperature range does not conflict with the package inserts of any routinely recommended vaccines.

Is the 2°- 8° Celsius temperature range for storing refrigerated vaccine also changing?

No. CDC’s shift to the 36° - 46° Fahrenheit temperature reading does not impact the Celsius temperature guidance. The Celsius range remains 2° C - 8° C, as stated in all manufacturers’ package inserts for routinely recommended vaccines.

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NEW MINIMUM REFRIGERATOR STORAGE TEMPERATURE OF 36° FAHRENHEIT

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Do patients who received vaccine previously stored at 35° F need to be revaccinated if that vaccine’s package insert recommends storage at 36° F-46° F?

The CDC does not recommend revaccinating patients who may have received vaccine stored at 35° F while that vaccine’s package insert recommends storage at 36°F-46° F. The CDC does not have data to support the need for revaccination.

Does vaccine previously stored at 35° F need to be discarded/returned if that vaccine’s package insert recommends storage at 36° F - 46° F?

The CDC does not recommend discarding/returning vaccine previously stored at 35° F if that vaccine’s package insert recommends storage at 36° F-46° F. The CDC does not have data to support the need to discard/return this vaccine.

What is the optimal temperature for storing refrigerated vaccines?

CDC recommends storing refrigerated vaccines at the midpoint of the recommended 2° C-8° C range (36 ° F - 46° F), which is 5° C (40° F).

When will VFC Program materials reflect the adjusted guidance?

The program is working to update all related materials as quickly as possible, starting with the Inventory Order and Distribution (IMODS) website.

Should I adjust my temperature monitoring device (digital min/max thermometer or data logger) to reflect the updated Fahrenheit temperature range?

Yes. CDC recommends that providers check their temperature monitoring device’s current Fahrenheit temperature range settings. For specific instructions on adjusting your temperature monitoring device’s settings, contact the manufacturer of the device.

In addition, be sure to take the following actions:

- Check the refrigerator temperature to ensure the temperature is between 36°F to 46° F.
- Set alarms on your temperature monitor device(s) to reflect the new minimum allowable temperature of 36° F.
- Download and use a copy of the updated paper temperature log which shows 36° F as the minimum acceptable temperature from www.immunize.org:

FAHRENHEIT TEMPERATURE LOG
CELSIUS TEMPERATURE LOG
2017 PROVIDER RE-ENROLLMENT

Medical offices that plan to participate in the NJ VFC and 317-Funded Adult (317) Programs in 2017 must complete online re-enrollment. The re-enrollment period commenced on November 29, 2016, and will close on December 23, 2016. Notice to re-enroll will be posted on the New Jersey Immunization Information System (NJIIS) Bulletin Board and emailed to your office.

Prepare for re-enrollment now:

There are specific requirements for re-enrollment in the VFC and 317 Programs. The following is a checklist for the items you will need to successfully re-enroll:

1. The primary and back-up vaccine coordinators must take one of the below educational options:
   A. Participate in the Understanding New Jersey's Vaccines for Children Webinar. This webinar must be taken after March 1, 2016, in order for it to count towards the 2017 re-enrollment.
   B. Attend the Vaccine Storage and Handling session at the New Jersey Immunization Conference (formerly known as the VFC Conference) that was held on November 30, 2016.
   C. Complete the following CDC “You Call the Shots” courses after March 1, 2016:
      Module 16: Vaccines for Children Program 2016
      AND
      Module 10: Storage and Handling—2016

      To receive credit for the “You Call the Shots” modules, print out or write down the course number and verification code provided at the end of the module. Use the course number and verification code to print out the certificate of participation. Write your office PIN number on each “You Call the Shots” certificate of participation and email to VFC@DOH.NJ.GOV.

2. Check that your primary and back-up National Institute of Standards and Technology (NIST) thermometers have valid calibration certificates valid through December 31, 2016.

3. Prepare an estimate of your patient population by age and insurance type (including privately insured patients).

Offices which do not complete 2017 re-enrollment in a timely manner will have program vaccine removed from their office.
AFIX: NOT JUST A VISIT, BUT A RESOURCE

The New Jersey Department of Health (NJDOH) has restored its Assessment, Feedback, Incentives, and eXchange (AFIX) Program and is conducting visits at select Vaccine for Children (VFC) providers.

What is AFIX?

AFIX is a quality improvement program used to raise immunization coverage levels and reduce missed opportunities. This program consists of four main components:

- **Assessment** of the healthcare provider’s vaccination coverage levels and immunization practices.
- **Feedback** of the results to the provider along with the recommended strategies to improve processes, immunization practices, and coverage levels.
- **Incentives** to recognize and reward improved performance.
- **eXchange** of healthcare information and resources necessary to facilitate improvement.

Why is AFIX important for your practice?

The quality improvement process, AFIX, can help your practice:

- Increase immunization coverage rates
- Increase traffic within your practice (more appointments, increase patients)
- Increase staff knowledge about immunization
- Decrease vaccine-preventable diseases (VPD)
- Decrease medical costs due to VPD
- Decrease missed opportunities to vaccinate
- Promote Health People 2020 goals

Is the AFIX visit mandatory?

VFC and 317 providers sign an agreement to participate in educational opportunities associated with the VFC Program. AFIX is one of those educational opportunities. Each year, the New Jersey VFC Program will pick 25% of active VFC providers to participate in an AFIX visit.

What happens during an AFIX visit?

VFC staff will meet with the Medical Director and policy makers to review the office’s immunization coverage rates and best practices. Immunization rates will be calculated using data from the New Jersey Immunization Information System (NJIIS). At the conclusion of the meeting, two to three quality improvement measures will be identified by the practice to focus on over the next three to six months. AFIX staff will conduct another analysis of immunization coverage rates at three months (and sometimes at six months) post-initial visit to assess progress and provide further feedback.

How do providers participate in AFIX?

The VFC will select providers on a yearly basis to visit, but if you are interested in receiving an AFIX visit prior to being selected, please contact the AFIX Coordinator at AFIX@doh.nj.gov.
PROMOTE ADOLESCENT IMMUNIZATION WITHIN YOUR PRACTICE

The Partnership for Maternal and Child Health of Northern New Jersey, in collaboration with the New Jersey Department of Health, is hosting the fifth annual Protect Me With 3+ adolescent contest. The contest raises awareness about the importance of adolescent immunizations among preteens, teens, and parents in an effort to increase vaccination rates for adolescent immunizations: tetanus, diphtheria, acellular pertussis (Tdap), human papillomavirus (HPV), meningococcal conjugate (MenACWY), and flu vaccination.

New Jersey middle school and high school students, in grades 5 through 12, are encouraged to create informational posters and videos about key vaccinations. Last year’s contest received over 200 entries; the winning entries can be viewed at www.protectmewith3.com.

Entries for this year’s contest will be accepted through January 27, 2017. Following the final submission deadline, the top five submissions in each category will be posted on the Protect Me With 3+ website for public voting. Make sure to check out the website in March 2017 to participate in the voting process and help select the winning submissions! The top three winners in each category and the classroom with the most eligible entries will receive awards and will be honored at a ceremony in April 2017.

Please visit the website www.protectmewith3.com, or email info@protectmewith3.com for additional details!

HIBERIX® IS NOW AVAILABLE THROUGH THE VFC PROGRAM

HIBERIX® is a vaccine indicated for active immunization for the prevention of invasive disease caused by Haemophilus influenzae type b. HIBERIX® is approved for use in children six weeks through four years of age (prior to the fifth birthday).

HIBERIX® dosage and administration is a four-dose series (0.5 mL each) given by intramuscular injection:
- Primary series: One dose each at 2, 4, and 6 months of age. The first dose may be given as early as six weeks of age.
- Booster: One dose at 15 through 18 months of age.

HOW TO STORE HIBERIX®

Storage Before Reconstitution
- Lyophilized vaccine vials: Store refrigerated between 2° and 8°C (36° and 46°F)
- Protect vials from light, store in original box
- Diluent: Store refrigerated or at controlled room temperature between 2° and 25°C (36° and 77°F). Do not freeze. If diluent is frozen, do not use and contact the VFC Program.

Storage After Reconstitution
- Administer immediately or if administration was refused, store refrigerated between 2° and 8°C (36° and 46°F) and administer within 24 hours. Note the date and time of reconstitution.
- Follow the VFC process to waste the reconstituted vaccine if not used within 24 hours.
- Do not freeze. If frozen after reconstitution, do not use and contact the VFC Program.

Hiberix® prescribing information can be seen here: Hiberix® Package Insert