

IMMUNIZATIONS

RATIONALE

“Vaccines are among the most cost-effective clinical preventive services and are a core component of any preventive services package. Childhood immunization programs provide a very high return on investment. For example, for each birth cohort vaccinated with the routine immunization schedule (this includes DTap, Td, Hib, Polio, MMR, hepatitis B, and varicella vaccines), society saves 33,000 lives, prevents 14 million cases of disease, reduces direct health care costs by \$9.9 billion, and saves \$33.4 billion in indirect costs.”¹

In the August 2, 2013 issue of Morbidity and Mortality Weekly Report (MMWR) it was reported that kindergarten vaccination coverage remained high (greater than 90%).² However, there are an increasing number of children who have vaccine exemptions. It was noted that the exemptions have clustered geographically and high numbers would impact the community immunity. Exemption to immunizations should not be taken because of convenience.

Since 2014 California law requires documentation that authorized health care practitioners have provided information to parents seeking personal beliefs exemptions to vaccines required for child care or school. More information about the law and the personal belief exemption form (in multiple languages) may be found at [Shots for School](#). Signing the form documents that the provider has provided information to the parent but is not an endorsement of declining to immunize. In 2015 SB 277 was passed. It eliminate the personal beliefs exemption option from school immunization law and also requires the governing board of a school district to notify parents or guardians of a school’s immunization rates.

Childhood Immunization Schedule

For the most current schedule on the recommended childhood immunizations go to the [American Academy of Pediatrics](#) or to the [Centers for Disease Control and Prevention](#). The schedule is based on the recommendations made by the federal Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics, and the American Academy of Family Physicians.

Proper Handling of Vaccines

Federal Vaccine for Children (VFC) Program providers receive vaccines at no cost to administer to eligible children. In turn VFC Program Providers are required to store, monitor and handle vaccines appropriately using proper equipment and techniques. For additional Information, job aids, and free online immunization training, go to the [EZIZ website](#).

SCREENING REQUIREMENTS

IMMUNIZATIONS

- Assess immunization status at each health assessment visit and during each encounter. See the [Recommended Childhood Immunization Schedule](#). Make sure the patient is up-to-date on vaccines recommended at a younger age (e.g., 2 doses of varicella vaccine).
- Administer all recommended vaccines unless medically contraindicated or refused by the parent. [“Guide to Contraindications and Precautions to Basic Childhood Immunizations”](#)
- Provide a copy of the relevant Vaccine Information Statement (VIS) to the parent/care giver prior to administering any vaccine.
- Give a California Immunization Record to the parent/caregiver showing the date and name of the health care provider administering each vaccine.
- Record each vaccine given, manufacturer, and lot number in the patient’s permanent medical record and the California Immunization Registry (CAIR)

Bright Futures*

[Performing Preventative Service](#), A Bright Futures Handbook,

[Bright Futures, Guidelines for health Supervision of Infants, Children, and Adolescents](#),

CONSIDERATIONS FOR REFERRAL TREATMENT AND/OR FOLLOW-UP

- Advise parent/caregiver of the date and type of vaccinations the child must still receive.
- Schedule the child for any additional appointments necessary to bring immunizations status up-to-date, complete a vaccine series (e.g., HPV), or receive boosters (e.g., meningococcal conjugate vaccine booster at age 16 years).
- Report all reactions to vaccines to the [Vaccine Adverse Event Reporting System \(VAERS\)](#). The forms can be found on the VAERS website and can be completed online, by FAX, or mail.
- Report all vaccine administration errors to the National Vaccines Errors Reporting Program at <http://verp.ismp.org/>

Resources

[Immunization Action Coalition](#) for downloadable Vaccine Information Statements (VIS).

Also has links to the [ACIP Recommendations](#); [AAP Policy Statements](#); [vaccine package inserts](#), [FDA Product Approval](#), [Institute of Medicine \(IOM\) Publications](#) and [World Health Organization \(WHO\) Position Papers](#).

[Epidemiology and Prevention of Vaccine-Preventable Diseases](#), The Pink Book: Course Textbook, (12th edition, second printing, May 2012).

IMMUNIZATIONS

[California VFC and General Immunization Resources. www.eziz.org](http://www.eziz.org)

[California School and Child Care Immunization Resources: www.shotsforschool.org](http://www.shotsforschool.org)

[ACIP Immunization Recommendations. www.cdc.gov/vaccines](http://www.cdc.gov/vaccines)

[CDC Hart of Contraindications and Precautions to Commonly Used Vaccines for Childhood Vaccines.](#)

References

¹ HealthyPeople.gov. Retrieved September 19, 2014.

² [Vaccination Coverage Among Children in Kindergarten — United States, 2012–13 School Year](#). MMWR, August 2, 2014. Retrieved September 19, 2014.

*American Academy of Pediatrics (AAP) materials linked to with permission for reference only. Use of these materials beyond the scope of these guidelines must be reviewed and approved by the AAP, who can be reached at marketing@aap.org.