



Epidemiology Services
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BC Centre for Disease Control

December 19, 2003

ATTN: Medical Health Officers and Branch Offices
Public Health Nursing Administrators and Assistant Administrators
Holders of Communicable Disease Control Manuals

Re: Immunization Program Revisions

Please note the following revisions to the Immunization Program:

(1) Section II – Immunization Schedules

- Revised Table of Contents due to pages being moved from Section III.
- Page 6 – moved section 3.0 to page 7.
- Page 7 - “Vaccines Recommended for High Risk Clients:”
 - Clarification of ages eligible for pneumococcal conjugate vaccine
- Page 7a - “Adult and Child Immunization Post Hematopoietic Stem Cell Transplant (HSCT):”
 - Page moved here from Section III “Contraindications and Routine Precautions for Immunization.”
 - Tetanus, diphtheria, and acellular pertussis vaccine (Tdap) is to be provided to children ≥ 7 years of age up to and including 18 years of age.
 - Tetanus, diphtheria, and polio vaccine (TdP) is to be provided to those ≥ 19 years of age. The decision to provide TdP, and not Tdap, to adult HSCT recipients was made by BCCA Hematology.
- Page 7b – “Adult Immunization Post Hematopoietic Stem Cell Transplant (HSCT):”
 - Page moved here from Section III “Contraindications and Routine Precautions for Immunization.”
 - The information has been re-formatted only.

Administrative Circular: 2003: 13



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- Page 7c - “Child Immunization Post Hematopoietic Stem Cell Transplant (HSCT):” – new addition to the manual.
- Page 7d - – “**BCCH Multi-organ Transplant Clinic ACCELERATED Immunization Schedule for Children Expected to be Transplanted BEFORE 18 Months of Age**” – new addition to the manual.
- Page 7e – “**BCCH Multi-organ Transplant Clinic ROUTINE Immunization Schedule for Children Expected to be Transplanted AFTER 18 Months of Age**” – new addition to the manual.

(2) Section III - “Contraindications and Routine Precautions for Immunization”

Revised Table of Contents as the information pertaining to immunization of HSCT recipients was moved to Section II “Immunization Schedules.”

Pages 15 and 16 re-paginated due to the above.

Sub-section 9.0 “References” on previous page 18, dated June 2003 deleted.

(3) Section VII – “Biological Products”

Revised Table of Contents, as the Dukoral™ page was moved into alphabetical order.

Page 4a “Dukoral™:”

- Under “Contraindications” added history of an anaphylactic reaction to cholera vaccine (a component of Dukoral™).

Page 5 “Haemophilus B Conjugate Vaccine:”

- Under “Indications,” point #2 – no change has been made in the list of indications - the wording was made consistent with other parts of the manual.



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Page 6 “Hepatitis A Vaccine Indications:”

- “Previously unimmunized” has been added as a clarifying statement for persons who are anti-HCV positive and persons who are chronically infected with hepatitis B.
- Persons sharing illicit drug snorting, smoking or injecting drug equipment are added to the list of those eligible for hepatitis A vaccine.

Page 14 “Hepatitis B Vaccine Pre-exposure Indications:”

- Persons sharing illicit drug snorting, smoking or injecting drug equipment are added to the list of those eligible for hepatitis B vaccine.
- Recipients of kidney transplants added to the list of those eligible for hepatitis B vaccine.
- Persons with chronic liver disease, and liver or kidney transplants are identified as immunosuppressed, with the recommendation for double μg dose for age of hepatitis B vaccine.

Page 23 “Hepatitis B Vaccine Program for End Stage Renal Disease Clients:”

- The 2 – 4 – 6 month schedule for infants and young children has been removed. The schedule is 0 –1 – 6 months for all high risk clients.

Page 28 “Immune Globulin Preparations:”

- The vastus lateralis has been added as another site to be used in children and adults when large volumes of HRIG are to be administered and the maximum volumes of HRIG have already been administered into the ventrogluteal and dorsogluteal sites.

Pages 35, 37, and 39: hyperlink regarding immunization of HSCT recipients now links to Section II 3.1.

Page 41 “Pneumococcal Conjugate Vaccine:”

- New footnote “Ø” - a reminder that when child is two years of age, offer pneumococcal polysaccharide vaccine as well.

Page 41a “Completion of Conjugate Pneumococcal Vaccination When *Primary Series* Has Been Interrupted:”



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- New footnote “Δ” - “Consider a primary series interrupted when the child subsequently presents at an age that is older than the original age grouping in which they first presented”.

Page 43 “Pneumococcal Polysaccharide Vaccine;”

- Clarification under “Indications” – persons eligible for this vaccine are **all** those with hepatitis C. The earlier wording was “chronic hepatitis C.”

Page 53 “Tetanus-Diphtheria - acellular Pertussis (TdaP):”

- Revised wording in first bullet under “Indications” – “in children \geq 7 years of age and adolescents who have not had a primary pertussis immunization series, or whose immunization status is unknown.”
- New footnote “♣” - There should be a minimum of 5 years since receipt of a previous dose of a tetanus –diphtheria –containing vaccine.
- Footnote “♦” has been re-worded to: “Administer number of doses (to a maximum of 3 to complete the pertussis vaccine series.

Page 62 “Varicella Zoster Immune Globulin:”

- Added the phone number for Canadian Blood Services.

Please remove and destroy the following pages from the Immunization Chapter of the Communicable Disease Control Manual:

Section II: TOC, page 6	Dated June 2003
Section II: page 7	Dated August 2003
Section III: TOC, pages 15, 16 and 18	Dated June 2003
Section VII: TOC, pages 5, 37, 39, 41, 41a, 43, 53 and 62	Dated August 2003
Section VII: pages 6, 14, 23, and 28	Dated March 2003
Section VII: pages 35 and 65	Dated June 2003

Insert the following pages in the Immunization Chapter:

Section II: TOC, pages 6, 7, 7a, 7b, 7c, 7d, and 7e	
Section III: TOC, pages 15, and 16	Dated December 2003



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Section VII: TOC, pages 4a, 5, 6, 14, 23, 28, 35, 37, 39,
41, 41a, 43, 53 and 62

Dated December 2003

If you have any questions or concerns, please contact Karen Pielak, Nurse Epidemiologist, or Cheryl McIntyre, Associate Nurse Epidemiologist, at telephone (604) 660-6061, fax (604) 660-0197 or by e-mail to karen.pielak@bccdc.ca or cheryl.mcintyre@bccdc.ca.

Sincerely,

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