

Cochlear Implant Services

4480 Oak St. – Office 1D20 Vancouver, B. C. V6H 3V4 Phone: 604 875-2345 ext. 5239 Fax: 604 875-2977

Dear Family,

Vaccines provide important protection and are an important part of the pre-surgery process for your child. Make sure your child has had all of their recommended vaccines and that they are up to date before surgery.

It is very important that your child receive all routine childhood vaccines on time and according to the recommended schedule. However, as a candidate for a cochlear implant the following vaccines which provide protection against bacteria that can cause meningitis (an infection of the lining of the brain) are especially important: *Haemophilus influenzae* type B (Hib), pneumococcal conjugate, and pneumococcal polysaccharide. Even if your child does not go on to receive a cochlear implant, these vaccines are still very important.

<u>Surgery will not be scheduled until these vaccines are up-to-date</u>. Your child can receive these vaccines at your local public health unit or from your family doctor. To find your nearest health unit, go to http://www.immunizebc.ca/finder and enter your postal code. When you call to make an appointment to have your child immunized, let the receptionist know that your child is a candidate for a cochlear implant.

Please bring this letter to the appointment so that your doctor or nurse can write down the vaccines your child has already had and provide any vaccines your child needs. These vaccines should be given as early as possible to ensure full protection.

Thank you,

BC Children's Hospital Cochlear Implant Team

Note:

- 1. After your child receives their vaccines, please request that their records are faxed to Cochlear Implant Services at BC Children's Hospital.
- 2. It is important to provide records to the cochlear implant clinic as soon as possible as delays in immunization will lead to delays in surgery.



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Name of Child:				_	Ready fo	or Surgery Office Use Only)
Date of Birth:				_	(For Cocnlear	
Care Card #:				_		
BCCH MR #:				_		
Please complete form	n and fax a copy l	back to BC Ch	nildren's Hospit	tal Cochlear Implar	nt Services 604	1-875-2977
Vaccine ^A	# Doses required	Date of 1 st dose	Date of 2 nd dose	Date of 3 rd dose	Date of 4 th Dose	Series complete Yes/No
Hib as part of: DTaP-HB-IPV-Hib (Infanrix hexa®) and DTaP-IPV-Hib (Infanrix®-IPV/Hib)	4 doses ^B	2 months	4 Months	6 months	18 months	-
Pneumococcal conjugate CD Prevnar® 13	3 or 4 doses ^{E F}	2 months	4 months	6 months (if identified <12 months of age)	12 months	
Pneumococcal Polysaccharide ^G Pneumovax® 23	1 dose	≥ 2 years				
NOTE: Annual influen	za vaccine is recor	nmended and	provided free to	children 6 to 59 moi	nths of age.	
Health Unit/Clinic wh	nere vaccines rece	eived:				
Name of Immunization	on Provider:					

Name of Family Doctor/Pediatrician:

Abbreviations: D—Diphtheria, T—Tetanus, aP—Pertussis, HB—Hepatitis B, IPV—Polio, Hib—Haemophilus influenzae type B, PCV13—Pneumococcal conjugate vaccine 13 valent, PPV23—Pneumococcal polysaccharide vaccine 23 valent

^B Children initiating Hib immunization after 6 months of age require less than 4 doses.

^c Children 5 years of age and older are no longer eligible for publicly funded PCV13.

^D Children less than 5 years of age who completed a series of PCV7 or 10 should be referred to their immunizer for one dose of PCV13.

Number of doses of PCV13 required depends if child identified as a candidate for cochlear implant before or after first birthday. Children under one year should be immunized according to the high risk schedule (@ 2, 4, 6, and 12 months). Children identified as a cochlear implant candidate after one year of age should be immunized according to the routine schedule.

F Children initiating PCV13 immunization after 12 months of age require less than 3 doses.

^G PPV23 is not part of the routine childhood schedule but is recommended for cochlear implant recipients, given at 2 years of age or older and at least 8 weeks after the last dose of PCV13.