

# Table of Updates

Revision Date: January, 2019

The updates listed are from the current update back to July 2016.

Section	Updates	Date
Biological products <b>Botulism:</b> <b>Botulism Antitoxin</b> <b>Heptavalent Types A to G</b>	Incorporated requirements around storage/handling specific to this product.  Special Access Program forms no longer required.	January 2019
Biological products <b>DTaP-IPV-Hib-HB:</b> <b>Diphtheria-Tetanus-Acellular</b> <b>Pertussis-Hepatitis B-Polio-</b> <b>Haemophilus influenza type b</b> <b>Conjugate Combined Vaccine</b>	Clarified schedule for infants with a birth weight less than 2000 grams.	January 2019
Biological products <b>HIB:</b> <b>Haemophilus influenza type b</b> <b>Conjugate Vaccine</b>	Incorporated catch-up schedule for HIB.	January 2019
Biological products <b>MMR-Var:</b> <b>Measles-Mumps-</b> <b>Rubella0Varicella Combined</b> <b>Vaccine</b>	<ul style="list-style-type: none"> <li>Incorporated recommendations for children with history of febrile seizures.</li> <li>Minimum spacing between MMR and/or varicella containing vaccines updated.</li> <li>MMR-Var vaccine no longer contraindicated for HSCT recipients as per CIG.</li> </ul>	January 2019
Biological products <b>Polio:</b> <b>Polio Vaccine</b>	Updated recommendations from WHO for OPV doses given on or after April 1, 2016.	January 2019
Biological products <b>Tuberculin:</b> <b>Tuberculin PPD</b>	Updated to align with current Canadian standards.	January 2019
Biological products <b>Varicella:</b> <b>Varicella Zoster Immune</b> <b>Globulin</b>	May be offered up to 10 days post-exposure to modify varicella disease.	January 2019
Special situations for immunization <b>Immunization for Child HSCT</b>	<ul style="list-style-type: none"> <li>Updated dosing and scheduling of hepatitis B vaccine for hyporesponsive individuals.</li> <li>MMR-Var vaccine no longer contraindicated for HSCT recipients as per CIG.</li> </ul>	January 2019
Immunization schedules: ▪ <b>Adult Immunization</b> <b>Schedule</b>	Updated to incorporate recommendation to offer dTap in every pregnancy as of January 1, 2019.	December 2018

Section	Updates	Date
Immunization schedules: <ul style="list-style-type: none"> <li>▪ <b>Routine Immunization Schedule</b></li> <li>▪ <b>Infants Routine Immunization Schedule</b></li> <li>▪ <b>School Immunization Schedule</b></li> </ul>	Immunization schedules updated to incorporate s. 18.5 of the <a href="#">Public Health Amendment Act</a> which states:  “A health practitioner who performs an immunization shall comply with (a) the most recent version of an immunization schedule published by the Chief Medical Officer, or (b) the part of the most recent version of an immunization schedule published by the Chief Medical Officer that is identified by the Chief Medical Officer as being mandatory.”	December 2018
Adverse event following immunization policy and procedures <b>Adverse Events Following Immunization Policy for Alberta Immunization Providers</b>	Updated to align AEFI policy with requirements as per <a href="#">Immunization Regulation</a> .	December 2018
Vaccine Storage and Handling Management (formerly Cold Chain Management Policy and Procedures): <b>Alberta Vaccine Storage and Handling Policy for Provincially Funded Vaccine</b> (formerly Alberta Vaccine Cold Chain Policy)	Updated to align reporting and documentation of temperature excursions (cold chain breaks) with requirements as per <a href="#">Immunization Regulation</a> .	December 2018
Biological products <b>Varicella: Varicella Vaccine</b>	Updated NACI Recommendations for varicella proof of immunity. Verbal history is not a reliable indicator of immunity in populations where varicella vaccine has been introduced. Clarified immunization recommendations for HCWs.	November 2018
Biological products <b>dTap: Diphtheria-Tetanus-Acellular Pertussis Combined Vaccine</b>	Updated to include recommendation to offer dTap in every pregnancy. For implementation January 1, 2019.	November 2018
<u>Introduction</u> AIP Background: <ul style="list-style-type: none"> <li>▪ Federal leadership</li> </ul> Provincial Mandate: <ul style="list-style-type: none"> <li>▪ legislative authority and provincial leadership</li> </ul> Eligibility Criteria for Provincially Funded Vaccine Roles and Responsibilities: <ul style="list-style-type: none"> <li>▪ delivery of childhood immunization in Alberta</li> <li>▪ immunization opportunities</li> <li>▪ responsibilities of immunization providers</li> </ul>	Introduction of the AIP reorganized and updated. Eligibility Criteria for Provincially Funded vaccine is new. Roles and Responsibilities – updated.	October 2018
General principles <ul style="list-style-type: none"> <li>▪ Assessment Expected Prior to Vaccine Administration</li> <li>▪ Biological Considerations</li> </ul>	General Principles - Assessment Expected Prior to Vaccine Administration and Biological Considerations replaces General Immunization guidelines and Contraindications and Precautions.	October 2018

## AIP Updates

Section	Updates	Date
Biological products <b>MMR: Measles-Mumps-Rubella Combined Vaccine</b>	MMR – updated to incorporate post-exposure recommendations for infants 6 to 11 months of age.	October 2018
Biological products <b>Botulism: Botulism Antitoxin Heptavalent (Equine) Types A to G</b>	Botulism – updated to incorporate revised product monograph.	October 2018
Biological products <b>Influenza: Influenza Vaccine Quadrivalent Inactivated</b>	Updated for 2018/2019 Influenza season.	August 2018
Biological products <b>Pneumococcal: Pneumococcal Vaccine, 13- valent Conjugate</b>	Clarified eligibility for individuals with malignant solid organ tumors and long term immunosuppression.	August 2018
Biological products <b>Pneumococcal: Pneumococcal Vaccine, 23- valent Polysaccharide</b>	Clarified eligibility for individuals with cancer and past history of cancer.	August 2018
Biological products <b>Td/TdP: Tetanus Immune Globulin</b>	Updated to include minimum spacing between doses.	August 2018
Immunization schedules: <b>School Immunization Schedule</b>	Updated to incorporate two-dose scheduling for HPV 9 for individuals 9 to 14 years of age who are immunocompetent. Implementation is September 2018 for school immunization program.	July 2018
Biological products <b>Td/TdP: Tetanus Post-exposure Prophylaxis in Injury/Wound Management</b>	Updated to include minimum spacing between TIG doses.	July 2018
Biological products <b>Hepatitis B (HBV): Hepatitis B Vaccine</b>	Updated dosing and scheduling for hyporesponsive individuals under 16 years of age. <ul style="list-style-type: none"> <li>▪ Engerix®-B –3 doses using 1.0 mL [20 µg] (change from 4 dose using 0.5 mL [10 µg]).</li> <li>▪ Recombivax HB® - 3 doses using 1.0 mL [10 µg] (change from 3 doses using 0.5 mL [5 µg]).</li> </ul>	July 2018
Biological products <b>Meningococcal: Meningococcal Conjugate (Groups A,C,Y and W-135) Vaccine</b>	Updated Nimenrix® licensed use - starting at 6 weeks of age (change from 12 months of age).	July 2018
Adverse event following immunization policy and procedures <b>Adverse Events Following Immunization Policy for Alberta Immunization Providers</b>	Updated reporting criteria for 'Other Severe or Unusual Events': Requires emergency room visit within 72 hours of immunization <b>added for which there is no other known cause.</b>	July 2018

Section	Updates	Date
Immunization schedules: <b>Routine Immunization Schedule</b> <b>Infants Routine Immunization Schedule</b> <b>Infants Beginning Immunization at 4 Months of Age or Later</b>	Immunization schedules updated to incorporate change to Rotavirus vaccine schedule.	April 2018
Biological products <b>Rabies:</b> <b>Rabies Vaccine</b>	Removed reference to rabies pre-exposure form and link to form. As of January 1, 2018 this form does not need to be submitted to Alberta Health.	April 2018
Biological products <b>MMR-Varicella:</b> <b>Measles Mumps Rubella-Varicella Combined Vaccine</b>	Updated to include NACI recommendations for varicella proof of immunity: verbal history is not a reliable indicator of immunity in populations where varicella vaccine has been introduced.  This recommendation will be phased in starting with children 12 months up to and including 6 years of age as they present for immunization.	April 2018
Biological products <b>MMR:</b> <b>Measles Mumps Rubella Combined Vaccine</b>	Updated rubella indications to include: adults born before 1957 generally presumed to have immunity to rubella.	April 2018
Biological products <b>Varicella:</b> <b>Varicella Vaccine</b>	Updated to include NACI recommendations for varicella proof of immunity: verbal history is not a reliable indicator of immunity in populations where varicella vaccine has been introduced.  This recommendation will be phased in starting with the following four groups: children 12 months up to and including 6 years of age, women identified through routine prenatal screening, health care workers (HCW) upon hire, and post-secondary HCW students as they present for immunization.	April 2018
Biological products <b>Rotavirus:</b> <b>Rotavirus Vaccine</b>	Updated to include RotaTeq® which will be used for infants initiating a rotavirus vaccine starting May 1, 2018. RotaTeq® series is three-doses where as Rotarix® is two-doses.	April 2018
Biological products <b>HPV:</b> <b>Human Papillomavirus Vaccine</b>	Updated to incorporate two-dose scheduling for individuals 9 to 14 years of age who are immunocompetent. Implementation is September 2018 for school immunization program.	April 2018
Biological products <b>DTaP-IPV-Hib-HB:</b> <b>Infanrix hexa</b> □	Updated to include post-immunization serology recommendations for infants born to infected mothers and infants who are a household contact of a hepatitis B case or carrier.	March 2018
Special situations for immunization <b>Immunization of Specific Populations</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes.	February 2018
Special situations for immunization <b>Principles of Immunization in HSCT and SOT Recipients</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes.	February 2018

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Special situations for immunization <b>Immunization for Child HSCT</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes. <ul style="list-style-type: none"> <li>People awaiting HSCT should not receive varicella-containing vaccine.</li> <li>All HSCT recipients, regardless of GVHD, should receive both vaccines Pneumo-C-13 and Pneumo-P-23 (adults and children).</li> <li>Consider 1 dose MMR and then check serology. If no seroconversion give 2nd dose if needed 3 or more mos after 1st dose.</li> </ul>	February 2018
Special situations for immunization <b>Immunization for Adult HSCT</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes. <ul style="list-style-type: none"> <li>People awaiting HSCT should not receive varicella-containing vaccine.</li> <li>All HSCT recipients, regardless of GVHD, should receive both vaccines Pneumo-C-13 and Pneumo-P-23 (adults and children).</li> <li>Consider 1 dose MMR and then check serology. If no seroconversion give 2nd dose if needed 3 or more mos after 1st dose.</li> </ul>	February 2018
Special situations for immunization <b>Immunization for Child Expecting SOT before 18 months of Age</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes. <ul style="list-style-type: none"> <li>Screen for measles, mumps, rubella, and varicella 6 weeks post immunization.</li> </ul>	February 2018
Special situations for immunization <b>Immunization for Child Expecting SOT after 18 months of Age</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes. <ul style="list-style-type: none"> <li>Screen for measles, mumps, rubella, and varicella 6 weeks post immunization.</li> </ul>	February 2018
Immunization goals and rates for Alberta <b>Immunization Goals and Objectives</b>	Immunization goals updated to be consistent with revised National guidelines.	January 2018
Special situations for immunization <b>Immunization of Adult SOT Candidates and Recipients</b>	Guidelines were reviewed by expert working group. Updated for clarity and to incorporate wording changes. <ul style="list-style-type: none"> <li>Screen for measles, mumps, rubella, and varicella 6 weeks post immunization.</li> </ul>	February 2018
Biological products <b>Hepatitis B (HBV): Hepatitis B Vaccine</b>	Incorporated updated CIG guidelines for individuals at high risk: recommend a documented series for those with only verbal history who are anti-HBs positive and recommend a complete second series if anti-HBs negative after first series.	November 2017
Biological products <b>Pneumococcal: Pneumococcal Vaccine, 13-valent Conjugate</b>	Addition of nephrotic syndrome as indication for eligibility in adults as per CIG. Clarification of scheduling for healthy and high risk children.	November 2017
Biological products <b>DTaP-IPV-Hib-HB: Infanrix hexa®</b>	Expand indications to include hepatitis B vaccine as Universal Infant Hepatitis B program for infants born March 1, 2018 or after.	November 2017
Biological products <b>Immune Globulin: Immune Globulin (Human)</b>	Updated to incorporate change in dose recommended in Hepatitis A post-exposure as per Grifols Therapeutics Inc. change in prescribing Information and MMWR.	November 2017

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Biological products <b>HPV:</b> <b>HPV 9</b>	Expanded eligibility to include MSM 17 to 26 years of age as per NACI recommendation.	October 2017
Biological products <b>Td/TdP:</b> <b>Tetanus Post-exposure Prophylaxis in Injury/Wound Management</b>	Incorporated management of tetanus-prone wounds for infants younger than 6 months of age who have not received a full three dose primary series of tetanus toxoid-containing vaccine.	September 2017
Biological products <b>dTap vaccine</b>	Included recommendations for immunization of contacts of diphtheria cases and carriers of diphtheria.	September 2017
Biological products <b>Influenza Vaccine:</b> ▪ <b>Fluzone®</b> ▪ <b>Fluad®</b>	Influenza Vaccines - Updated for 2017-2018 Influenza season.	July 2017
Introduction <b>Immunization Goals and Objectives</b>	Rotavirus added - by 12 months of age 80% of children will have received two doses of rotavirus vaccine.	June 2017
Cold chain management <b>AVCC Policy</b>	Alberta Vaccine Cold Chain Policy updated.	March 2017
Adverse event following immunization policy and procedures <b>Adverse Events Following Immunization Policy for Alberta Immunization Providers</b>	Adverse Events Following Immunization Policy for Alberta Immunization Providers updated.	December 2016
Biological Products <b>Td Polio:</b> ▪ <b>Td Polio Adsorbed</b>	Updated to reflect changes to Polio indications.	November 16, 2016
Biological Products <b>Polio Vaccine:</b> ▪ <b>Polio: Imovax®</b>	Routine Adults - Due to the limited supply of polio vaccine and the low risk of exposure to polio in Alberta and Canada – the recommendation for the routine immunization of unimmunized adults is suspended until further notice.  Health Care Workers - Primary series and single life time reinforcement for HCWs who may be exposed to patients excreting polio.  Travelers to 'Polio Emergency Countries' - Exporting and/or infected with polio and staying 4 weeks or longer. Primary series and reinforcing dose for adults. <a href="http://polioeradication.org/polio-today/polio-now/public-health-emergency-status/">http://polioeradication.org/polio-today/polio-now/public-health-emergency-status/</a>	November 16, 2016

Section	Updates	Date
Biological Products <b>Rabies Vaccine:</b> <ul style="list-style-type: none"> <li>▪ Imovax®</li> <li>▪ RabAvert®</li> </ul>	Recommendations included for Post-exposure series initiated in another country: <ul style="list-style-type: none"> <li>▪ If the post-exposure series initiated meets the World Health Organization (WHO) approved vaccine, was administered I.M., and meets WHO approved schedule - complete the series as appropriate. RIG can be offered if the client has not already received RIG and it can be administered within seven days of the first dose of I.M. rabies vaccine.</li> <li>▪ For uncertain vaccines, vaccines given I.D., or unknown schedule, including no clear documentation - restart series and offer RIG.</li> </ul>	November 16, 2016
Biological products <b>DTaP-IPV-HIB:</b> <ul style="list-style-type: none"> <li>▪ Infanrix®-IPV/Hib</li> <li>▪ Pediacel®</li> </ul>	Pediacel® revised to include off-license use of infants 6 weeks of age and older.  Both Pediacel® and Infanrix®-IPV/Hib updated to reflect current off license use of vaccine for HSCT clients including adults.	September 21, 2016
Biological products <b>Influenza Vaccine:</b> <ul style="list-style-type: none"> <li>▪ Fluzone®</li> <li>▪ Flud®</li> <li>▪ Flumist®</li> </ul>	Influenza Vaccines - Updated for 2016-2017 Influenza season.  Flumist® <ul style="list-style-type: none"> <li>▪ Removed preferential recommendation for 2 to 17 years of age.</li> <li>▪ Removed egg-allergic individuals as a contraindication.</li> </ul>	August 29, 2016
Biological products <b>Hepatitis B Vaccine:</b> <ul style="list-style-type: none"> <li>▪ Engerix®-B</li> <li>▪ Recombivax HB®</li> </ul>	Incorporated updated recommendations from CIG and ACIP for immune compromised individuals and those with renal disease. <ul style="list-style-type: none"> <li>▪ Recommendation that these individuals who are antiHBs negative after first series receive a second series followed by serology one month later.</li> </ul> Included schedule for infants born to HBsAg <b>negative</b> mothers weighing less than 2000 grams who received Hepatitis B vaccine at birth. <ul style="list-style-type: none"> <li>▪ Neonates weighing less than 2,000 grams who received their first dose of hepatitis B vaccine at birth should receive three additional doses of vaccine administered at 1, 2, and 6 months of age.</li> </ul>	August 25, 2016
Biological products <b>Hepatitis B Immune Globulin (HBIG)</b>	Updated to be consistent with CIG, Red Book and ND guidelines for indications for HBIG. <ul style="list-style-type: none"> <li>▪ Removed under indications for HBIG: Infants younger than 12 months of age whose primary caregiver is infected with hepatitis B.</li> <li>▪ Note: this does not include infants born to hepatitis B infected mothers. The indication for HBIG remains.</li> </ul>	August 25, 2016