

This is an Official Montana State DPHHS HAN Info Service Message

DPHSHANINFO20050906B

Distributed via the DPHHS Health Alert Network (HAN) System

Tuesday, 06-September-2005 14:27 hours (2:27 PM MDT)

The Montana State Department of Public Health & Human Services received this HAN message from CDC (see Section 2 - below). The original CDC message was downgraded to an "Info Service Message" as the primary content of the message (Interim Immunization Recommendations) is less relevant in Montana. However, the immunization information may be useful to volunteers from Montana traveling to the area affected by Hurricane Katrina to assist in relief efforts. Montana healthcare professionals who are considering volunteering for the relief effort should consider visiting the website <https://www.swern.gov> , or alternatively, <https://volunteer.hhs.gov>

Additionally the State of Montana Immunization Section has developed a "SPECIAL TEMPORARY CONDITIONAL ATTENDANCE FORM MONTANA SCHOOL IMMUNIZATION LAW FOR DISPLACED STUDENTS OF HURRICANE KATRINA" which is attached (Katrina Document.doc). The form provides a temporary waiver for students from those States most directly affected by Hurricane Katrina (Alabama, Mississippi, and Louisiana) who have been displaced and may not have their immunization records immediately available. Displaced students may be given a special conditional 30 day enrollment to ease their transition, providing their records at a subsequent time. For questions regarding the use of this form, contact the Immunization Section at 406.444.5580.

DPHHS, in coordination with DES and the Governor's Office, has also established a donations helpline as outlined in the press release below. **Please circulate information regarding this coordinated helpline number to your community partners and news media (1-800-237-5079).** This helpline is intended to assist citizens and other agencies in resolving questions that relate to donation of cash or other resources. As a follow-up to DPHHS HAN Info Service Message 20050906A, sent earlier today (Sept 6, 2005) the Montana HAN system is sending out additional contact information on other charitable organizations that individuals or groups may elect to direct their donations through. More information will be provided on the the donations helpline as it becomes available.

Montana Donations Hurricane Relief Hotline

· American Red Cross

1-800-HELP NOW (435-7669)

www.redcross.org

· The Salvation Army

1-800-SAL-ARMY (725-2769)

P.O. Box 4857, Jackson, MS 39296-4857

www.salvationarmyusa.org

· United Way of America

1-800-272-4630

P.O. Box 630568, Baltimore, MD 21263-0568

<http://nationalunitedway.org>

· America's Second Harvest

1-800-344-8070

www.secondharvest.org

· Operation Blessing International

1-800-436-6348

977 Centerville Turnpike Virginia Beach, VA 23463

www.ob.org

· **Humane Society of the United States**

HSUS Disaster Relief Fund

Dept. DRFHBM, 2100 L Street, NW, Washington, DC 20037.

www.hsus.org

· **American Society for the Prevention of Cruelty to Animals**

1-866-275-3923

ASPCA Disaster Relief Fund

424 East 92nd Street, New York, NY 10128

www.aspca.org

For additional listings of reputable charities, as well as the latest information on the disaster and recovery, visit the Federal Emergency Management Agency Web site at:

http://www.fema.gov/press/2005/resources_katrina.shtm.

Church members may also want to check with their local churches to find out if they are involved in relief efforts.

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Section 2:

-----Original Message-----

From: Health Alert Network [mailto:healthalert@cdc.gov]

Sent: Monday, September 05, 2005 1:51 PM

To: Health Alert Network

Subject: CDC Advisory 00232 - Interim immunization recommendations for individuals displaced by Hurricane Katrina

This is an official

CDC Health Advisory

Distributed via Health Alert Network

September 05, 2005, 15:45 EDT (03:45 PM EDT)

CDCHAN-00232-05-09-05-ADV-N

Interim immunization recommendations for individuals displaced by Hurricane Katrina

The purpose of these recommendations is two-fold:

1. To ensure that children, adolescents, and adults are protected against vaccine-preventable diseases in accordance with current recommendations.

Immunization records are unlikely to be available for a large number of displaced children and adults. It is important that immunizations are kept current if possible.

2. To reduce the likelihood of outbreaks of vaccine-preventable diseases in large crowded group settings.

Although the possibility of an outbreak is low in a vaccinated U.S. population, it is possible that outbreaks of varicella, rubella, mumps, or measles could occur. Although measles and rubella are no longer endemic to the United States, introductions do occur, and crowded conditions would facilitate their spread. Hepatitis A incidence is low in the affected areas, but post-exposure prophylaxis in these settings would be logistically difficult and so vaccination is recommended. In addition, the influenza season will begin soon and influenza can spread easily under crowded conditions.

I. Recommended immunizations

If immunization records are available:

Children and adults should be vaccinated according to the recommended child, adolescent, and adult immunization schedules.

Childhood and Adolescent Immunization Schedule: www.cdc.gov/nip/recs/child-schedule.htm.

Adult Immunization Schedule: www.cdc.gov/nip/recs/adult-schedule.htm.

If immunization records are not available:

Children aged <6 years of age should be forward vaccinated. They should be treated as if they were up-to-date with recommended immunizations and given any doses that are recommended for their current age. This includes the following vaccines:

Diphtheria and tetanus toxoids and acellular pertussis vaccine (DTaP)

Inactivated Poliovirus vaccine (IPV)

Haemophilus influenzae type b vaccine (Hib)

Hepatitis B vaccine (HepB)

Pneumococcal conjugate vaccine (PCV)

Measles-mumps-rubella vaccine (MMR)

Varicella vaccine if no history of chickenpox

Influenza vaccine if in Tier 1.* This includes all children from 6-23 month and children up to age 10 with a high risk condition (MMWR 2005;54:749-750). www.cdc.gov/mmwr/preview/mmwrhtml/mm5434a4.htm

Hepatitis A is not routinely recommended in all states; state immunization practice should be followed.

Children and adolescents (aged 11-18 years) should receive the following recommended immunizations:

Adult formulation tetanus and diphtheria toxoids and acellular pertussis vaccine (Tdap)

Meningococcal conjugate vaccine (MCV (ages 11-12 and 15 years only)

Influenza vaccine if in Tier 1* (MMWR 2005;54:749-750) www.cdc.gov/mmwr/preview/mmwrhtml/mm5434a4.htm

Adults (aged >18 years) should receive the following recommended immunizations:

Adult formulation tetanus and diphtheria toxoids (Td) if >10 years since receipt of any tetanus toxoid-containing vaccine

Pneumococcal polysaccharide vaccine (PPV) for adults ≥65 years or with a high risk condition (MMWR 1997;46(No. RR-8):12-13)

Influenza vaccine if in Tier 1*(MMWR 2005;54:749-750). www.cdc.gov/mmwr/preview/mmwrhtml/mm5434a4.htm

II. Crowded Group Settings

In addition to the vaccines given routinely as part of the child and adolescent schedules, the following vaccines should be given to displaced person living in crowded group settings:

Influenza Everyone ≥6 months of age should receive influenza vaccine.

Children 8 years old or younger should receive 2 doses, at least one month apart.

Varicella Everyone >12 months of age and born in the United States after 1965 should receive one dose of this vaccine unless they have a history of chickenpox.

MMR Everyone >12 months of age and born after 1957 should receive one dose of this vaccine.

Hepatitis A Everyone ≥2 years of age should receive one dose of hepatitis A vaccine unless they have a clear history of hepatitis A.

Immunocompromised individuals, such as HIV-infected persons, pregnant women, and those on systemic steroids, should not receive the live viral vaccines, varicella and MMR. Screening should be performed by self-report.

Documentation

It is critical that all vaccines administered be properly documented. Immunization records should be provided in accordance with the practice of the state in which the vaccine is administered. Immunization cards should be provided to individuals at the time of vaccination.

Standard immunization practices should be followed for delivery of all vaccines, including provision of [Vaccine Information Statements](#).

Diarrheal diseases

Vaccination against typhoid and cholera are not recommended. Both diseases are extremely rare in the Gulf States, and there is no vaccine against cholera licensed for use in the United States.

Rabies vaccine should only be used for post-exposure prophylaxis (e.g., after an animal bite or bat exposure) according to CDC guidelines.

***Influenza Tier 1** (*MMWR* 2005;54:749-750). www.cdc.gov/mmwr/preview/mmwrhtml/mm5434a4.htm

Tier 1 recommendations include the following priority groups:

- Persons ages ≥ 65 years with comorbid conditions
- Residents of long-term care facilities
- Persons aged 2-64 years with comorbid conditions
- Persons ≥ 65 years without comorbid conditions
- Children aged 6-23 months
- Pregnant women
- Healthcare personnel who provide direct patient care
- Household contacts and out-of-home caregivers of children aged < 6 months.

This document is also available online at <http://www.bt.cdc.gov/disasters/hurricanes/katrina/vaccrecdisplaced.asp>

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The goal Montana's Health Alert Network is to transmit information to local public health authorities as quickly as possible, and assign a suitable priority to the message that is sensitive to the impact of a health-related event providing information of immediate utility relative to the public health and safety of Montanans. For questions or comments relative to Montana's HAN system you may contact the Montana State HAN Coordinator Jim Aspevig at <<mailto:jaspevig@mt.gov>> or the Associate HAN Coordinator Gerry Wheat at <<mailto:gwheat@mt.gov>>

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service Message: provides general information regarding a situation or opportunity; does not typically require immediate action.

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This message has been sent under blind carbon copy (bcc) to suppress the display of a large number of e-mail addresses. You have received this message based upon the information contained within our emergency notification data base. If you have a different or additional e-mail or fax address that you would like us to use please notify us as soon as possible by e-mail at hhshan@mt.gov <mailto:hhshan@mt.gov>