

**2006 National Influenza Vaccine Summit
Crowne Plaza Buckhead in Atlanta, Georgia
Noble Ballroom
January 24-25, 2006**

**Monday Evening, January 23rd
(Early Registration Only)**

7:00 PM **Early registration (1 hour)**
(Early registration is recommended so you will have more time to enjoy the continental breakfast tomorrow.)

8:00 PM **Close early registration**

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Tuesday Morning, January 24th

6:45 AM	Registration Continental breakfast hosted by the AMA	
7:50 AM	Welcome and housekeeping	Raymond A. Strikas (CDC) Litjen Tan (AMA)
8:00 AM	Introductory remarks; Introduction of keynote speaker	J. Edward Hill (AMA)
8:10 am	Keynote Address	Julie L. Gerberding (CDC)
8:30 AM	Summit overview, meeting objectives and charge for Session One	Raymond A. Strikas (CDC) Litjen Tan (AMA)
	Session One <u>Identify issues</u> experienced during the 2005-2006 influenza vaccination season	
8:45 AM	<u>Review</u> trends observed from recent survey data to identify issues experienced during the 2005-2006 influenza vaccination season	Raymond A. Strikas (CDC)
9:30 AM	Discussion and questions regarding survey trends	Whole Summit
10:30 AM	30-minute break – Refreshments provided by the AMA	
11:00 AM	2005-2006 licensed vaccine manufacturer's perspectives including plans for next season	
	<ul style="list-style-type: none"> • Chiron • GlaxoSmithKline • Med Immune • Sanofi Pasteur, Incorporated 	Peter A. Galiano Vincent I. Akonkhai Andrew MacKnight Kathleen L. Coelingh Philip H. Hosbach
11:40 AM 11:50 AM	Food and Drug Administration (FDA) perspective Vaccine distributors' perspectives	Jerry P. Weir (FDA)
	<ul style="list-style-type: none"> • Health Industry Distributors Association (HIDA) • Health Distributors Management Association 	Jennifer M. Alfisi Scott M. Melville (HDMA)
12:10 PM	90-minute lunch on your own (See enclosed list of nearby restaurants.)	

Tuesday Afternoon, January 24th

1:40 PM	Discussion and questions from Session One	Whole Summit
2:40 PM	Review of Session One and charge for Session Two	Raymond A. Strikas (CDC) Litjen Tan (AMA)
2:50 PM	Session Two <u>Organize and prioritize</u> issues identified in Session One	Raymond A. Strikas (CDC) Litjen Tan (AMA) Whole Summit
3:20 PM	30-minute break – Refreshments provided by the AMA	
3:50 PM	Review of Session Two and charge for Session Three	Raymond A. Strikas (CDC) Litjen Tan (AMA)
4:00 PM	Session Three <u>Develop and prioritize Summit Recommendations</u> (based on the results of Sessions One and Two)	Raymond A. Strikas (CDC) Litjen Tan (AMA)
5:25 PM	Discussion and questions from Session Three	Whole Summit
5:55 PM	Snapshot of tomorrow	Raymond A. Strikas (CDC) Litjen Tan (AMA)
6:10 PM	Adjourn (See enclosed list of nearby restaurants.)	

Wednesday Morning, January 25th

6:45 AM	Registration and Continental breakfast hosted by the AMA	
8:00 AM	Review of Session Three and charge for Session Four	Raymond A. Strikas (CDC) Litjen Tan (AMA)
8:15 AM	Charge for Session Four	Raymond A. Strikas (CDC) Litjen Tan (AMA)
8:20 PM	Session Four <u>Develop Summit activities</u> to address each Summit recommendation identified in Session Three	Raymond A. Strikas (CDC) Litjen Tan (AMA) Whole Summit
10:30 AM	30-minute break – Refreshments provided by the AMA	
11:00 AM	Review and discuss the Summit activities developed	Raymond A. Strikas (CDC) Litjen Tan (AMA) Whole Summit
12:00 NOON	90-minute lunch on your own (See enclosed list of nearby restaurants.)	

Wednesday Afternoon, January 25th

1:30 PM	The Summit activities and the HHS Pandemic Plan	Bruce G. Gellin (NVPO)
1:45 PM	The Summit activities and the ACIP meeting in February, 2006	Nicole M. Smith (CDC)
2:00 PM	Additional reactions to the Summit Activities	Whole Summit
3:15 PM	Wrap up	Raymond A. Strikas (CDC) Litjen Tan (AMA)
3:30 PM	Adjourn – Have a safe trip home!	

ATTACHMENT

Potential Issues for the 2006 National Influenza Vaccine Summit¹

1. CDC's tiering recommendations

(Perceptions that CDC's tiering mechanism did/does not work was frequently commented upon.)

2. Management of Public expectation

(Public expectation for vaccine is heightened by communications in September, but when vaccine supplies are not distributed as quickly as anticipated, public discouragement and frustration follows.)

3. Process of vaccine testing and release

(Some perceptions are that it takes too long for the FDA to test and release vaccine lots.)

4. No-return policies

(No-return policies of the vaccine manufacturers have a negative impact, especially regarding the ordering and utilization of late-season vaccine.)

5. Communicating ordering and shipping policies

(What can the manufacturers and distributors share regarding vaccine ordering and shipping policies to enable more efficient/better management of the vaccine supply?)

6. Distribution of vaccine

(Perceptions of preferential shipping/distribution by both manufacturers and distributors repeatedly were reported from multiple health care provider types. For example, there were perceptions that those with large orders and/or a prior history of ordering received priority over smaller volume users and/or new customers - such as small physician practices. How can a more equitable distribution be achieved?)

7. Long-term care facility residents and staff

(Ensuring vaccination for long-term care residents and staff continues to be important. However, the type of vaccinator or size of their past orders should not take precedence over the fact that this population is at greatest risk from influenza and its complications.)

8. Knowing the location of influenza vaccine

(A better system is needed to monitor, identify and/or report upon the location of vaccine. Should this be a government responsibility and if so, what needs to happen to enable the government achieve this?)

9. Government's role in a vaccine crises

(What are the current and future responsibilities of the federal, state and/or local government during a vaccine crisis?)

10. Health care workers

(Too many health care workers choose not to be vaccinated.)

11. Anti-thimerosal laws

(Anti-thimerosal laws in states such as California, Illinois and Iowa could be a significant problem, especially in light of the fact that some of next season's vaccines will contain thimerosal.)

¹The above list is not intended to be exhaustive. It is anticipated that additional issues will be identified and addressed over the course of the two-day Influenza Summit. The following is a list of the sources of the above issues.

- Influenza Summit Executive Committee
- CDC/NIP Immunization Services Division Influenza Work Group conference calls
- The whole Summit conference call on Friday, November 18th
- CDC/AMA conference calls