



GPRC Bulletin 08-01

SUBJECT: Extended Season for Influenza Vaccinations

DATE: January 25, 2008

To: Executive Directors

CC: Site Managers, Clinical Directors, GPRC Coordinators

While late fall is the traditional season for influenza vaccinations, significant benefit can be achieved if vaccination efforts are continued throughout the influenza season, which can continue through May. Ample supplies of influenza vaccine are still available and at least 12 weeks of flu activity lie ahead in the current influenza season based on previous influenza seasons. I am writing now to recommend that you continue your efforts to vaccinate high-risk patients, especially the elderly, throughout the next few months and to provide information about two methods of identifying and tracking those patients who have not been vaccinated this year. If you are in need of additional Flu vaccine in order to fully immunize those patients who fall into the high risk categories included in the CDC Advisory Committee on Immunization Practices (ACIP) recommendations, please contact your county health department or visit the following link which provides a table with detailed vaccine purchase information:

http://www.preventinfluenza.org/ivats/ivats_07_08.xls

2007 Influenza Rates in California

In 2007, 57% of eligible patients in the California Area received the flu vaccine, compared to 59% of eligible patients age 65 and older nationally. Although marked improvements were made over the previous year, continued improvements are needed to protect this high-risk group from contracting the flu and developing serious flu-related complications, including pneumonia. In addition, this group should be immunized at least once against pneumococcal diseases, and patients who have not had this immunization should be offered this vaccine at the same time as the influenza vaccine.

Methods of identifying and contacting patients

There are two ways that clinics can identify patients who have not been vaccinated this year:

1. The Clinical Reporting System (the RPMS software package designed for monitoring and reporting of clinical GPRC measures) includes a feature that allows clinics to create lists of patients missing any GPRC screening or procedure, so that they can be scheduled for appointments. Patient lists for influenza vaccinations can also be prepared. Specific directions for preparing these lists appear in the CRS User manual beginning on page 176.

2. The new RPMS program application, iCare, can be used to establish panels of patients aged 65 years and older and can help generate patient lists of those who have not yet been vaccinated. For your use we have attached the following detailed instructions developed by the Portland Area Office:

- Creating a template of patients 65 and over using Q-man, to import into iCare.
- Importing the template and using iCare to determine who is in need of an Influenza Vaccination
- Viewing individual patient needs using iCare.

The iCare home page has a recorded demonstration of the process of creating and modifying a patient panel at <http://www.ihs.gov/CIO/ca/icare/index.asp> that is easy to access.

Special Web Ex training on iCare on February 19, 2008

The California Area office is sponsoring an hour-long Web Ex on using iCare to monitor influenza and pneumococcal immunizations of patients aged 65 and older on Tuesday, February 19 from 12:00-1:00 PM. Specific instructions to access this special training will be distributed soon and will be posted on the California Area Office website.

Contacts

Specific questions about immunization guidelines and vaccines should be directed to Susan Ducore. Questions about running patient lists should be directed to Elaine Brinn or Janae Price. Questions about using iCare to establish panels of patients should be directed to Gary Mosier.

David Sprenger, M. D.
Chief Medical Officer
California Area Indian Health Service