Update on ASTHO/CSTE/NACCHO/APHL Conf Calls (questions from Jan. 24, 2003)

Centers for Disease Control and Prevention

Frequently Asked Questions supporting the National Smallpox Vaccination Program – To be posted on Member-only websites of ASTHO, NACCHO, CSTE, and APHL

How should it be verified that a person has been vaccinated previously? (1/24/03)
Definitive evidence for secondary vaccinees is a scar or a record of vaccination. Preemptive evidence is a DOB prior to 1977, or service in the military prior to 1990.

Did MMWR on smallpox vaccine adverse events and their treatment get published today? (1/24/03)
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If someone was vaccinated in the past but did not have a take, are they considered a primary or secondary vaccinee? (1/24/03)
If there was no take, they are not previously vaccinated. If there was a take, then they are a secondary vaccinee.

On the form, there are three options to read take: Major, Equivocal, and No Take. How are these different? (1/24/03)
These terms are on many of the forms. Clinicians who are reading takes should not spend a lot of time on the difference between Equivocal and No Take. Equivocal is the same as No Take. Only a Major reaction is counted as a take.

Are states expected to do active surveillance for adverse events, regardless of their participation in the Kaiser survey? (1/24/03)
IOM has recommended that states do Active Surveillance for as many vaccinees as possible. As vaccinees are coming for site care, they should be assessed for serious clinical events and documented, especially up through Day 7. In addition, CDC has requested that all follow up be done with all vaccinees between Days 21 and 28.

Question 12 on Page 4 of the Pre-Vaccination Information Packet talks about taking steroids within the past month, but other resources refer to 3 months of steroids. (1/24/03)
Potential vaccinees that have had chemotherapy or radiology during the past three months should not be vaccinated. For patient taking oral steroids in immunosuppressive doses, they are contraindicated unless they have been off steroids for greater than or equal to 1 month.

What is the Hospital Computer System? (1/24/03)
This is a tool that may assist hospitals with post-vaccination monitoring of their employees. This will enable hospitals to record data on site care monitoring, take checks, and active surveillance of adverse events. It will link to VAERS to report significant adverse events. The vision is to allow people to collect takes, monitor the sites, and conduct an interview during days 21-28,

without re-entry in PVS. (Washington State has developed a similar system.) It is expected that this system will have the capability to link to PVS or the hospital's own system for take readings and follow-up. This system is not ready to go yet and won't be for a period of time.

Who is the contact for obtaining digital certificates at the state level? (1/24/03)
Vicki Kipreos can answer these questions. (vck5@cdc.gov)

Is the 'Campaign to Increase Physician Awareness about Smallpox and the Smallpox Vaccination Program' Packet ready yet? What changes are being made? What is the timeline? (1/24/03)
CDC is working on this right now. The final version is at least 3 weeks away. For mailing of this packet, 20 states prefer that these be mailed to the states in a collated fashion, so they can insert their own information. 9 states preferred that this be sent directly to the physicians on their behalf. States can contact Lynne Steele with the mailing information for their states (lvs6@cdc.gov).