Update on ASTHO/CSTE/NACCHO/APHL Conf Calls (questions from Feb. 7, 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

Vaccine

Vaccination Procedures

Is it required that only one person do PVS data entry? This could pose a challenge as many states are minimally staffed.

It was intended that only one person would be *submitting* this PVS data. Multiple people can do data entry, but each person that is doing data entry needs a certificate. Only one person from each state can do data entry at any given time.

What is the helpdesk number for progress reporting?

The number is 404-639-8749 or nipspgrantee@cdc.gov (this is the same email for sending progress reports if that is the chosen route).

Should states still follow the FDA insert in the package?

The Draft Recommendations for Use of Smallpox Vaccine in a Pre-Event Smallpox Vaccination Program (ACIP and HICPAC supplemental recommendations) clearly state 3 punctures rather than 2-3 as listed in the package insert. The military has used 3 punctures in primary vaccines and 15 punctures in re-vaccinees with a slightly higher take rate in their revaccinees than in their primary vaccinees.

Contraindications

Post Vaccination

Response to Vaccination

Has CDC considered the risks of reporting Adverse Events at the state level to the media? Due to low numbers, there is concern that the media could quickly determine the vaccinees names and information.

CDC will do everything possible to protect the confidentiality of persons who experience Adverse Events. As part of this effort, CDC will not release state-specific information for Adverse Events.

Kentucky is taking digital photographs of takes as they go. Could these be shared with CDC for equivocal takes? Could these be useful for evaluating adverse events?

CDC believes that the use of digital photography is a good alternative, especially for incorporating CDC input on equivocal takes.

Smallpox Disease

Vaccination Program

Is there a way to automate the twice weekly reporting process from the information that is entered in PVS?

This is hard to do for summary information, such as the teams that are vaccinated, etc. It is possible for the states to use the PVS system to help with total these counts, but automating this right now is not possible.

What is the status of the posting of the ACIP guidelines on the website?

The Draft Recommendations for Use of Smallpox Vaccine in a Pre-Event Smallpox Vaccination Program (ACIP and HICPAC supplemental recommendations) are on the CDC website at http://www.bt.cdc.gov/agent/smallpox/vaccination/acip-guidelines.asp

There are potential vaccinees (e.g., DMAT) who do not officially fall into the Stage I definition. Regional Emergency Response Coordinators at HHS are concerned about this as well.

HHS sent a memo on 1/24 under the signature of the Office of Emergency Response asking states to voluntarily include the Disaster Medical Assistance Teams (DMAT) as part of their overall public health teams for vaccination efforts. States will determine if they can vaccinate such personnel.

Liability and Section 304 of the Homeland Security Act
Compensation

Do the liability provisions in Section 304 cover private physicians that are being vaccinated as part of their local public health response teams?

CDC will work closely with HHS to make sure that this provision is clearly defined.

Miscellaneous

Are states offering fee HIV testing at the vaccination sites?

Not all HIV testing is free. The information provided by each state indicates which testing sites are free and which are not within each state.

Is military doing their own investigation as far as Adverse Events? When the VAERS report is used at the local level for states, it typically gets forwarded back to the state health department for their information and follow-up investigations.

The military is reporting all their data. The VAERS report is usually the first report to be sent in. DoD has its own public health tracking system as well. Nothing has happened yet that has required CDC assistance. The military is holding public reports until all the information has been gathered, to minimize the risk of publication of incorrect data.

How can states calculate the DoD Adverse Event rate?

The DoD has not provided full data yet about the denominator in this equation. The military will provide additional information at a later date.

On the DoD Smallpox Vaccination Program website, there is information available that offers perspective on some of the aggregate data. Has the military considered how the statistics may change as they collect more data?

It will be critical to explain this information carefully on these website updates. The military is relying on CDC for statistical information.

Several military reservists have come to state/VA hospitals for care. They do not have a PVS number. How can hospitals identify them?

The military does not use the PVS system. Military personnel can be identified by their SSN.