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SOUTH DAKOTA  
DEPARTMENT OF HEALTH

**Division of Health and Medical Services**  
Disease Prevention  
Family and Community Health Services  
Health Promotion  
State Epidemiologist

**MEMORANDUM 2015-03**

**TO:** All Vaccine Providers

**FROM:** Tim Heath

**DATE:** 07/22/2015

**RE:** Influenza Vaccine Orders

Enclosed you will find the order form for Influenza Vaccine for the 2015-16 season. Please order what you anticipate needing for the childhood campaign. Please submit your order by August 10. As a reminder all children six months through 18 years of age are eligible for free State Influenza Vaccine. This year all the influenza vaccine that was pre-booked for the childhood campaign is quadrivalent vaccine.

You will need to order your influenza vaccine by eligibility category this year. You will need to order the vaccine for children eligible for the VFC program and the vaccine you will need for children not eligible for the VFC program. As a reminder VFC eligible children must be under the age of 19 and be at least one of the following: has Medicaid, has no insurance, is American Indian/Alaskan native, is underinsured - only clinics that are Federally Qualified Health Centers, Rural Health Clinics, or are a State run community health offices can give VFC vaccine to the underinsured. All other providers must count the underinsured as non VFC.

Also it is a federal requirement that VFC vaccine must be separated from other publically funded vaccine. Enclosed are instructions from the CDC about separating stock of vaccine.

Please keep in mind that we will try to accommodate your vaccine preference but we may have to make substitutions to another

presentation at times. We have a finite amount of each vaccine presentation.

If you have any questions please contact me at:  
[tim.heath@state.sd.us](mailto:tim.heath@state.sd.us).

# 2015 - 2016 Seasonal Influenza Order Form

CLINIC/HOSPITAL NAME: \_\_\_\_\_ VFC PROVIDER NUMBER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ SD, ZIP CODE: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 FAX: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

## PLEASE READ CAREFULLY!!!!

This is the order form for the South Dakota Children's Influenza Immunization Initiative. **This vaccine is for children 6 months - 18 years old. Please order the number of doses in the order form below that you think you will use in the entire upcoming influenza season.** To estimate the number of doses you may need you can run a Doses Administered report in SDIIS for August 2014 through June 2015 to see how many influenza doses you administered last season and in what age and VFC eligibility categories. For ordering Influenza vaccine you **do not** need to order according to your regular vaccine ordering schedule. Please fill out this form and send it in to us as soon as possible. We will order your vaccine as it becomes available to us.

Community Health Nursing sites, please note that this order form is **NOT** for ordering adult influenza vaccine.

The State of South Dakota will receive vaccine in varying quantities at the start of the influenza season at McKesson. The South Dakota Immunization Program will not get all of our doses at once. **Please do not be alarmed that you will receive several shipments over several weeks to fill the entirety of your requested doses below.** We expect shipping to start sometime in late August or early September. It is recommended to start vaccinating as soon as you get the vaccine.

There will be limited doses of the Preservative Free presentations available. In order to be fair to everyone please order a combination of multi-dose vials and preservative free vaccine. Orders placed for only preservative free doses will be adjusted by the immunization program to include multi-dose vials as part of your total doses.

There will be limited doses of the Flumist presentation available. Orders placed for only Flumist will be adjusted by the immunization program to include other presentations as part of your total doses. First come first served; get your requests in early.

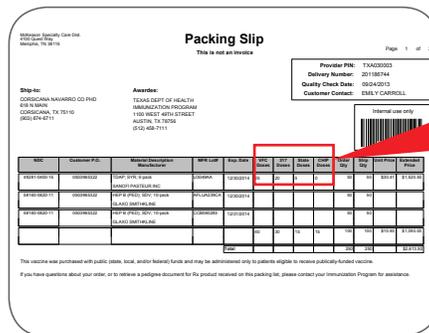
DESCRIPTION OF VACCINE	MINIMUM NUMBER OF DOSES	NUMBER OF <b>VFC</b> DOSES REQUESTED	NUMBER OF <b>STATE</b> DOSES REQUESTED	TOTAL NUMBER OF DOSES REQUESTED (VFC+STATE)
MULTI-DOSE VIAL FOR AGES 6 MONTHS THROUGH 18 YEARS	10			
PRESERVATIVE FREE SINGLE DOSE.25 mL FOR 6 - 35 MONTH OLD CHILDREN	10			
PRESERVATIVE FREE SINGLE DOSE.5 mL FOR 36 MONTH - 18 YEAR OLD CHILDREN	10			
FLUMIST (LAIV) NASAL SPRAY FOR 2 - 18 YEAR OLD CHILDREN	10			
<b>VACCINE INFORMATION STATEMENTS (VIS)</b>	<b>SHEETS PER PAD</b>	<b>NUMBER OF <u>PADS</u> REQUESTED</b>		
INACTIVATED INFLUENZA VIS	50			
LIVE INTRANASAL INFLUENZA VIS	50			

# Separating and Storing Your Vaccine Stock

## 1 How to identify vaccine by public funding type

There are generally 4 types of public funding:

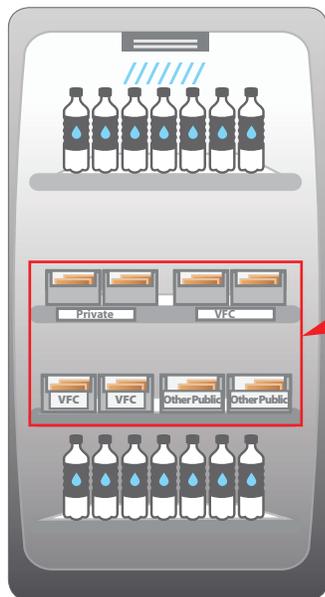
- VFC
  - 317
  - State
  - CHIP
- } Other Public



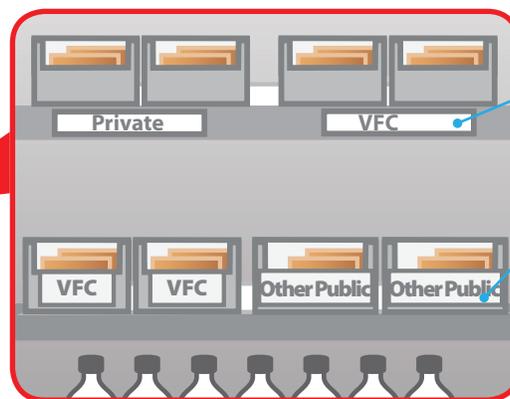
VFC Doses	317 Doses	State Doses	CHIP Doses
25	20	5	0

The funding type for each public vaccine is listed on the shipment's packing slip. Your private vaccines come in a separate shipment and must be stored apart from public vaccines.

## 2 How to store vaccine with only one fund type in a box



Organize your storage unit so vaccines are separated by VFC, Other Public, and Private. You can either:



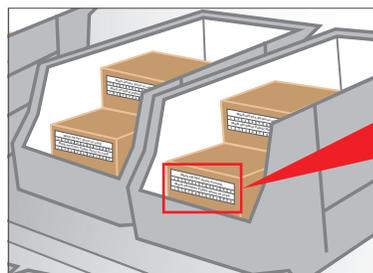
Label the storage unit shelf.

OR

Label the bins.

Place the vaccine in the proper bin.

## 3 How to store vaccine with more than one fund type in a box



Store these boxes in a separate bin. To keep track of your use:

Mark off VFC doses as used.								
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3	4	5	6	7	8	9
Mark off Other Public doses as used.								
<input checked="" type="checkbox"/>	2	3	4	5	6	7	8	9

1. Label the box of single-dose or multi-dose vials.
2. Highlight the number of doses from each funding type.
3. Mark off vaccine as you use it.

Be sure you don't cover important information such as vaccine name and lot number. Always keep vaccines in their original packaging with the lid closed to protect them from light.



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention