MADISON COUNTY
DEPARTMENT of HEALTH
Working to build a healthy community
PO Box 605, Wampsville, NY 13163 ~ Phone (315) 366-2361 ~ Fax (315) 366-2697
Eric Faisst, Director of Public Health *Dr. John B. Endres, President of Board of Health*

November 2, 2009

Dear Parents/Guardians:

As you know, a new influenza virus, called the 2009 H1N1 influenza virus is widespread in the United States, causing outbreaks of illness in many schools and communities. Fortunately, for most people, illness caused by this virus is no worse that than caused by seasonal flu. Unfortunately, some people can become very ill with H1N1. The Centers for Disease Control and Prevention (CDC) has recommended that children and young adults aged 6 months through 24 years be vaccinated against 2009 H1N1 as soon as the vaccine is available. The best way to protect your child from getting influenza is to have your child vaccinated.

Madison County Health Department will be offering free H1N1 vaccinations to children enrolled in school districts in Madison County. Clinics will be held at the district level (not in individual schools). These clinics **will only be open to children enrolled in school**. Children may only be vaccinated at their district's vaccination clinic. Because vaccine is not widely available at this time, no dates have been set for school clinics. You will be notified of specific dates and times, once vaccine supplies are available. Middle and high school students will be vaccinated during school hours. Elementary children will be vaccinated after school, so they can be accompanied by a parent. When the clinic dates are confirmed, parents of elementary school children will receive instructions on how to pre-register for the after school clinic. Participation in these vaccination clinics is completely voluntary.

The vaccine that will be given at school clinics is by injection (a shot). This vaccine is an inactivated form of the virus. You cannot get the flu from receiving a flu vaccine. Children under the age of 10 are recommended to have two doses of vaccine spaced about 4 weeks apart. We are asking that you follow up with your child's primary care provide to schedule your child for the second dose. Since most people who have suffered from flu-like illnesses are not tested to confirm if they had the H1N1 virus strain, it is recommended that these people should get the vaccine. Please note that this vaccine will not protect your child from seasonal flu.

There are some underlying health conditions that may prevent your child from receiving the H1N1 vaccine. These health conditions are listed in section 5 of the attached "What you need to Know" form. After receiving the vaccine, children will be monitored for any possible side effects. All children will receive written documentation they have received the H1N1 Novel vaccine. We recommend you provide a copy to your child's medical provider.

If you would like your child to receive the H1N1 novel vaccine at the school clinic:

1. Read the "What you need to know" vaccine information sheet included with this letter about the disease and vaccine

2. Complete page 1 of the attached vaccine consent form, sign and date it and return it to the school by **November 16, 2009.**
3. You do not need to answer question 1 or 15 for school based clinics and may leave these questions blank
4. At the bottom circle, you are giving permission to receive the 2009 H1N1 Influenza vaccine
5. If you do not return the consent, your child will not be vaccinated. No walk- ins will be accepted.
6. If you accept vaccination, the vaccine will be given to your child when it is available. The Health Department and School District will let you know when the vaccination clinic will take place.
7. If your child receives the vaccine from their provider before the school clinic is held and you need to withdraw your consent for vaccination, contact the Madison County Department of Health Immunization staff at 366-2848.
8. Early consent will help to ensure that your child is ready to receive the vaccine as soon as it is on hand.

The Madison County Health Department and the school district are working together to ensure the vaccination process is as streamlined and efficient as possible. Despite our planning efforts, there may be a significant wait at the evening clinics. Please arrive at the time you are scheduled. Again these clinics are for school aged children only. Consider bringing reading materials and snacks with you to the clinics. Do not bring your child to the clinics or send them to school on the clinic date if they have symptoms of flu-like illness.

If you have any questions about the vaccine or the vaccination clinics, please go to the Madison County Department of Health Website at http://healthymadisoncounty.org or the CDC's 2009 H1N1 influenza web site at http://www.cdc.gov/h1n1flu/ or http://www.cdc.gov/h1n1flu/parents for more information. Your child's health care provider also can answer your questions about the 2009 H1N1 influenza virus. If you have further questions you may contact the Health Department at 366- 2848 from 8 AM to 4:30 PM.

Sincerely,

Eric Faisst
Public Health Director
Madison County DOH

Madison DOH H1N1/Seasonal 09-10

Patient Information

* First Name | MI | * Last Name

Address | Apt#

City | State | Zip | Gender (1-M 2-F 3-Other)

* Date of Birth (MM/DD/YYYY) | Phone Number | Clinic ID: 0 5 3 0 0 0 2 1

* Mother's First Name | * Mother's Maiden(Last) Name

Emergency Contact

Relationship to Patient: 1-Parent 2-Guardian 3-Spouse/Partner 4-Sibling 5-Other Relative 6-Other

First Name | MI | Last Name

Phone Number

Please answer the following questions (circle the appropriate number)	Yes	No	Unknown
1. For individuals 19 and older: Have you reviewed and signed the NYSIIS Patient Consent Form?	1	2	3
2. Have you (your child) had any vaccine within the last 28 days, including the 2009 H1N1 Flu vaccine or ever had a pneumonia shot?	1	2	3
3. Do you work in healthcare or emergency medical services?	1	2	3
4. For ages 25-64 years: Do you have a chronic or immunosuppressive medical condition?	1	2	3
5. Are you pregnant?	1	2	3
6. Are you (your child) a household contact or caregiver for children younger than 6 months of age?	1	2	3
7. Are you (your child) sick with a fever today or have you (your child) taken antiviral medication for Flu within the last 2 weeks?	1	2	3
8. Do you (your child) have a severe allergy to eggs, a component of the vaccine, or an anaphylactic allergy to latex?	1	2	3
9. Have you (your child) ever had a serious reaction to the nasal spray or flu shot vaccine?	1	2	3
10. Have you (your child) ever had Guillain-Barré Syndrome?	1	2	3
11. Do you (your child) have close contact with anyone with a severely weakened immune system?	1	2	3
12. Is the child or teen to be vaccinated receiving long term aspirin treatment?	1	2	3
13. For children ages 2-4 years: Has the child had asthma or wheezing episodes in the last year?	1	2	3
14. For ages 2-49 years: Do you (your child) have any long term health problems?	1	2	3
15. I understand the Vaccine Information Sheet (VIS), Advanced Directives, Bill of Rights, and the Madison County HIPAA Privacy Policy will be made available for me to read, have read to me, and/or be provided to take home with me (my child).	1	2	3

I consent to receive the circled vaccine(s): Seasonal Influenza, pneumococcal, 2009 H1N1 Influenza.

I have read, or had explained to me the vaccine information sheet (VIS) for the above vaccination(s). I have had a chance to ask questions which were answered to my satisfaction and I understand the benefits and risks of the vaccination as described. I request that the above vaccination(s) be given to me (or the person named above for whom I am authorized to make this request). I authorize the release of any medical or other information necessary to process a Medicare or other insurance claim or for other public health purpose.

Patient or Parent/Guardian(Print Name) | Witness(Print Name) | Consent Date (MM/DD/YYYY)

Patient or Parent/Guardian(Signature) | Witness(Signature)

Campaign ID 21 Form ID 130

For Staff Use Only

Disposition at Triage:

1 - Referred for Treatment
2 - Referred for Medical Evaluation
3 - Treatment Declined
4 - Other

Disposition at Medical Evaluation:

1 - Referred for Treatment
2 - Referred for Medical Care
3 - Treatment deferred due to Medical Contraindication
4 - Other

Medication 1

Barcode #1

Place Medication Barcode#1 Here

Area Inoculated:

1-Left Arm 2-Right Arm 3-Oral 4-Left Thigh 5-Right Thigh
6-Nasal 7-Left Buttock 8-Right Buttock 9-Left Deltoid 10-Right Deltoid

Person Providing Treatment

Last 4 Digits of SSN or VID

Signature

Medication 2

Barcode #2

Place Medication Barcode#2 Here

Area Inoculated:

1-Left Arm 2-Right Arm 3-Oral 4-Left Thigh 5-Right Thigh
6-Nasal 7-Left Buttock 8-Right Buttock 9-Left Deltoid 10-Right Deltoid

Person Providing Treatment

Last 4 Digits of SSN or VID

Signature

Medication 3

Barcode #3

Place Medication Barcode#3 Here

Area Inoculated:

1-Left Arm 2-Right Arm 3-Oral 4-Left Thigh 5-Right Thigh
6-Nasal 7-Left Buttock 8-Right Buttock 9-Left Deltoid 10-Right Deltoid

Person Providing Treatment

Last 4 Digits of SSN or VID

Signature

Medication 4

Barcode #4

Place Medication Barcode#4 Here

Area Inoculated:

1-Left Arm 2-Right Arm 3-Oral 4-Left Thigh 5-Right Thigh
6-Nasal 7-Left Buttock 8-Right Buttock 9-Left Deltoid 10-Right Deltoid

Person Providing Treatment

Last 4 Digits of SSN or VID

Signature

*** Date Medication Administered (MM/DD/YYYY)**

__ __ / __ __ / __ __ __ __

2009 H1N1 INFLUENZA VACCINE

INACTIVATED (the "flu shot")

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is 2009 H1N1 influenza?

2009 H1N1 influenza (also called Swine Flu) is caused by a new strain of influenza virus. It has spread to many countries.

Like other flu viruses, 2009 H1N1 spreads from person to person through coughing, sneezing, and sometimes through touching objects contaminated with the virus.

Signs of 2009 H1N1 can include:

- Fatigue
- Fever
- Sore Throat
- Muscle Aches
- Chills
- Coughing
- Sneezing

Some people also have diarrhea and vomiting.

Most people feel better within a week. But some people get pneumonia or other serious illnesses. Some people have to be hospitalized and some die.

2 How is 2009 H1N1 different from regular (seasonal) flu?

Seasonal flu viruses change from year to year, but they are closely related to each other.

People who have had flu infections in the past usually have some immunity to seasonal flu viruses (their bodies have built up some ability to fight off the viruses).

The 2009 H1N1 flu is a new flu virus. It is very different from seasonal flu viruses.

Most people have little or no immunity to 2009 H1N1 flu (their bodies are not prepared to fight off the virus).

3 2009 H1N1 influenza vaccine

Vaccines are available to protect against 2009 H1N1. influenza.

- These vaccines are made just like seasonal flu vaccines.
- They are expected to be as safe and effective as seasonal flu vaccines.
- They will not prevent "influenza-like" illnesses caused by other viruses.
- They will not prevent seasonal flu. ***You should also get seasonal influenza vaccine, if you want to be protected against seasonal flu.***

Inactivated vaccine (vaccine that has killed virus in it) is injected into the muscle, like the annual flu shot. **This sheet describes the inactivated vaccine.**

A **live, intranasal** vaccine (the nasal spray vaccine) is also available. It is described in a separate sheet.

Some inactivated 2009 H1N1 vaccine contains a preservative called thimerosal to keep it free from germs. Some people have suggested that thimerosal might be related to autism. In 2004 a group of experts at the Institute of Medicine reviewed many studies looking into this theory, and found no association between thimerosal and autism. Additional studies since then reached the same conclusion.

4 Who should get 2009 H1N1 influenza vaccine and when?

WHO

Groups recommended to receive 2009 H1N1 vaccine first are:

- Pregnant women
- People who live with or care for infants younger than 6 months of age
- Health care and emergency medical personnel
- Anyone from 6 months through 24 years of age
- Anyone from 25 through 64 years of age with certain chronic medical conditions or a weakened immune system

As more vaccine becomes available, these groups should also be vaccinated:

- Healthy 25 through 64 year olds
- Adults 65 years and older

The Federal government is providing this vaccine for receipt on a voluntary basis. However, state law or employers may require vaccination for certain persons.

WHEN

Get vaccinated as soon as the vaccine is available.

Children through 9 years of age should get **two doses** of vaccine, about a month apart. Older children and adults need only one dose.

5 Some people should not get the vaccine or should wait

You should not get 2009 H1N1 flu vaccine if you have a **severe (life-threatening) allergy** to **eggs**, or to **any other substance in the vaccine**. *Tell the person giving you the vaccine if you have any severe allergies.*

Also tell them if you have ever had:
- a life-threatening allergic reaction after a dose of seasonal flu vaccine,
- Guillain Barré Syndrome (a severe paralytic illness also called GBS).

These may not be reasons to avoid the vaccine, but the medical staff can help you decide.

If you are moderately or severely ill, you might be advised to wait until you recover before getting the vaccine. If you have a mild cold or other illness, there is usually no need to wait.

Pregnant or breastfeeding women can get inactivated 2009 H1N1 flu vaccine.

Inactivated 2009 H1N1 vaccine may be given at the same time as other vaccines, including seasonal influenza vaccine.

6 What are the risks from 2009 H1N1 influenza vaccine?

A vaccine, like any medicine, could cause a serious problem, such as a severe allergic reaction. But the risk of any vaccine causing serious harm, or death, is extremely small.

The virus in inactivated 2009 H1N1 vaccine has been killed, so you cannot get influenza from the vaccine.

The risks from inactivated 2009 H1N1 vaccine are similar to those from seasonal inactivated flu vaccine:

Mild problems:

- soreness, redness, tenderness, or swelling where the shot was given • fainting (mainly adolescents)
- headache, muscle aches • fever • nausea

If these problems occur, they usually begin soon after the shot and last 1-2 days.

Severe problems:

- Life-threatening allergic reactions to vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the shot.
- In 1976, an earlier type of swine flu vaccine was associated with cases of Guillain-Barré Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS.

7 What if there is a severe reaction?

What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** the doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at **www.vaers.hhs.gov**, or by calling **1-800-822-7967**.

VAERS does not provide medical advice.

8 Vaccine injury compensation

If you or your child has a reaction to the vaccine, your ability to sue is limited by law.

However, a federal program has been created to help pay for the medical care and other specific expenses of certain persons who have a serious reaction to this vaccine. For more information about this program, call **1-888-275-4772** or visit the program's website at: **www.hrsa.gov/countermeasurescomp/default.htm**.

9 How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636 (1-800-CDC-INFO)** or
  - Visit CDC's website at **www.cdc.gov/h1n1flu** or **www.cdc.gov/flu**
- Visit the web at **www.flu.gov**

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

Vaccine Information Statement
2009 H1N1 Inactivated Influenza Vaccine 10/2/09