

Pandemic H1N1 Immunization Data Instruction Sheet

The data on this form is required from every vaccine delivery agent in the province of Ontario providing pandemic influenza H1N1-2009 vaccine, this form will be available electronically or paper based.

Instructions for patient/client data collection component (first 20 rows)

Leave categories on the form blank if they do not apply to the patient/client.

Vaccine Date: enter date vaccine was given in year-month-day.

Dose: Insert "x" in box that applies.

Gender: Insert "x" in box that applies.

Age in years: enter age of patient/client in years. If the client is between 6 months of age and less than 12 months of age enter age in months followed by "mo." (e.g. 6 mo.)

Definition of recipient group categories: Please be advised that the categories and corresponding rationale provided below have been obtained from the *Guidance on H1N1 Vaccine Sequencing* document published by the Public Health Agency of Canada (PHAC). This document and other relevant information about H1N1 influenza can be found online at www.phac-aspc.gc.ca

Chronic Condition:

Persons with chronic conditions (NACI list) under the age of 65
Rationale: at higher risk of complications; 65+ less affected to date, Canadian modeling suggests immunizing this group decreases population morbidity and mortality more than immunizing children (i.e. groups with highest attack rate)

Pregnancy

Rationale: at highest risk of severe disease, and to potentially protect their infants (This is a World Health Organization (WHO) definition and refers to the maternal antibodies transferred to the fetus in utero protecting the infant after birth as well as to include the post-partum period).

Remote or isolated setting

* Please note refers to where patient/client resides and not clinic location.

Rationale: limited access to medical care, potential for development of mass immunity and prevention of infection, logistically easier to target whole community; equity, high concentration of persons with chronic conditions, observed morbidity/mortality in some remote Aboriginal communities

Health Care Worker

All health care workers (HCW) involved with the pandemic response or delivery of essential health services:

- Those who provide direct patient care as well as those who support the provision of health care services
- Includes full-time staff, part-time staff, students, regular visitors and volunteers i.e. all persons carrying out the health care function
- Settings include acute care, chronic care, ambulatory/community care, emergency medical services, laboratory, public health departments, pharmacies etc.
- Includes Canadian Blood Services/Héma Québec and vaccine manufacturers

Rationale: prevent HCW spread to vulnerable patients, prevent outbreaks, protect HCW (reciprocity) and protect essential health infrastructure

Household Contact or Care provider

Individuals in this category include contacts of or those caring for:

- infants <6 months of age
- Persons who are immunocompromised

Rationale: indirect protection for persons at high risk who cannot be immunized or may not respond to vaccine

First Responder (police or firefighter)

Rationale: frequently attend emergency health situations with EMS

Swine worker

Rationale: to prevent opportunities for viral reassortment

Poultry worker

Rationale: to prevent opportunities for viral reassortment

First Nations

Rationale: a federal requirement to collect this data.

Instructions for H1N1 Vaccine Wastage Report and Adverse Events Tally

Number of vials of adjuvant wasted:

- Enter wastage in number of vials e.g. "3" (rationale: if any portion of adjuvant or antigen is wasted prior to reconstitution the entire vial would need to be wasted)
- Only record adjuvant and antigen wastage separately if wastage incidence occurred prior to or during process of reconstitution.

Number of vials of antigen wasted:

- Enter wastage in number of vials e.g. "3" (rationale: if any portion of adjuvant or antigen is wasted prior to reconstitution the entire vial would need to be wasted)
- Only record adjuvant and antigen wastage separately if wastage incidence occurred prior to or during process of reconstitution.

Number of doses of reconstituted vaccine wasted:

- Enter wastage in number of doses e.g. "18" (rationale: once vaccine is reconstituted vaccine wastage can be recorded per dose because the contents remaining in the vial are in the correct proportion for patient/client use)
- The reconstituted vaccine is called Arepanrix[®]

Number of doses of influenza A (H1N1) monovalent vaccine[®] wasted:

- Enter wastage in number of doses e.g. "18" (rationale: wastage can be recorded per dose because the contents remaining in the vial are in the correct proportion for patient/client use).
- The vaccine is called influenza A (H1N1) monovalent vaccine[®]

Number of Adverse events:

- Enter the total number of adverse events following immunizations e.g. "5" that occur at your facility in the time frame of the dates you have recorded on this form.
- The adverse events section of this form includes adverse events that occur at your office for patients/clients that you administered vaccine to **and for** those who present to your facility who received vaccine elsewhere.
- The number of adverse events totaled on this form **does not** replace standard Adverse Event Following Immunization reporting (AEFI) to your local public health unit.