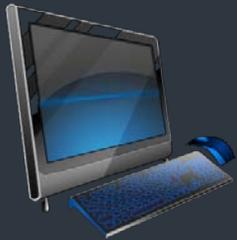


April/May  
2010

# A LOCH @ NESIIS



## Tech Tips

We often receive calls indicating a user account is locked or NESIIS login info has changed. Usually this is because the web browser was not completely closed out when the NESIIS session was ended.

So the big tip for this issue is: **When in doubt, close it out!**

We're always happy to help, but know it's frustrating when things don't work as they should. If you ever login to My Nebraska and find the NESIIS info is not yours, you need to re-enter the correct info from your Production login sheet.

## Help Desk:

888.433.2510

nesiishelp@dhhs.ne.gov

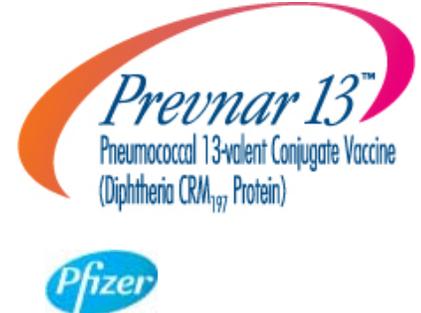


## Pprevnar 13 Inventory Adjustment

Pprevnar 13 will need to be entered into inventory under its new name.

### A few things to know:

- If you have already entered Pprevnar 13 under the old trade name, Pprevnar, you'll simply need to **Edit** that lot information to reflect the new trade name.
- Updating the trade name information in inventory will automatically update any doses you have already administered to patients from that lot.
- Pprevnar 7 will remain as **Pprevnar** within NESIIS.



The schedule in NESIIS has not yet been changed to reflect the need for a supplemental dose for those that need one. This would be any child who has finished the series with Pprevnar 7 but is still under 5 years of age. The change will be done soon. Stay tuned for updates!

## VIS Updates

### HPV & Japanese Encephalitis: VIS

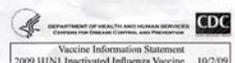
dates in NESIIS have been updated for HPV and Japanese Encephalitis. Please make sure you are verifying that the date selected in NESIIS is, in fact, the date you are giving your clients at the time of vaccination.



## Reminder...

**Staff Changes:** Please be sure to e-mail the Help Desk whenever you have staff changes. This will enable us to disable accounts for those who leave and create new ones for additions to your team.

<b>5</b> Some people should not get the vaccine or should wait	<b>7</b> What if there is a severe reaction?
<p>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. <i>Tell the person giving you the vaccine if you have any severe allergies.</i></p> <p>Also tell them if you have ever had:</p> <ul style="list-style-type: none"> <li>• a life-threatening allergic reaction after a dose of seasonal flu vaccine,</li> <li>• Guillain Barre Syndrome (a severe paralytic illness also called GBS).</li> </ul> <p>These may not be reasons to avoid the vaccine, but the medical staff can help you decide.</p> <p>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.</p> <p>Pregnant or breastfeeding women can get inactivated 2009 H1N1 flu vaccine.</p> <p>Inactivated 2009 H1N1 vaccine may be given at the same time as other vaccines, including seasonal influenza vaccine.</p>	<p><b>What should I look for?</b></p> <p>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.</p> <p><b>What should I do?</b></p> <ul style="list-style-type: none"> <li>• Call a doctor, or get the person to a doctor right away.</li> <li>• Tell the doctor what happened, the date and time it happened, and when the vaccination was given.</li> <li>• 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: <a href="http://www.vaers.hhs.gov">http://www.vaers.hhs.gov</a>, or by calling 1-800-822-7967.</li> </ul> <p>VAERS does not provide medical advice.</p>
<b>6</b> What are the risks from 2009 H1N1 influenza vaccine?	<b>8</b> Vaccine injury compensation
<p>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.</p> <p>The virus in inactivated 2009 H1N1 vaccine has been killed, so you cannot get influenza from the vaccine.</p> <p>The risks from inactivated 2009 H1N1 vaccine are similar to those from seasonal inactivated flu vaccine:</p> <p><b>Mild problems:</b></p> <ul style="list-style-type: none"> <li>• soreness, redness, tenderness, or swelling where the shot was given</li> <li>• fainting (mainly adolescents)</li> <li>• headache, muscle aches</li> <li>• fever</li> <li>• nausea</li> </ul> <p>If these problems occur, they usually begin soon after the shot and last 1-2 days.</p> <p><b>Severe problems:</b></p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• In 1976, an earlier type of swine flu vaccine was associated with cases of Guillain-Barre Syndrome (GBS). Since then, flu vaccines have not been clearly linked to GBS.</li> </ul>	<p>If you or your child has a reaction to the vaccine, your ability to sue is limited by law.</p> <p>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: <a href="http://www.hrsa.gov/consentmeasurescomp/default.htm">http://www.hrsa.gov/consentmeasurescomp/default.htm</a>.</p>
<b>9</b> How can I learn more?	<p>• Ask your provider. They can give you the vaccine package insert or suggest other sources of information.</p> <p>• Call your local or state health department.</p> <p>• Contact the Centers for Disease Control and Prevention (CDC):</p> <ul style="list-style-type: none"> <li>• Call 1-800-232-4636 (1-800-CDC-INFO) or</li> <li>• Visit CDC's website at <a href="http://www.cdc.gov/h1n1flu">http://www.cdc.gov/h1n1flu</a></li> </ul> <p>• Visit the web at <a href="http://www.flu.gov">http://www.flu.gov</a></p>





## Additional Polio Info

ACIP is clarifying the poliovirus vaccination schedule to be used for specific combination vaccines. When DTaP-IPV/Hib\* (Pentacel) is used to provide 4 doses at ages 2, 4, 6, and 15-18 months, an additional booster dose of age-appropriate IPV-containing vaccine (IPV [Ipol] or DTaP-IPV† [Kinrix]) should be administered at age 4-6 years. This will result in a 5-dose IPV vaccine series, which is considered acceptable by ACIP. DTaP-IPV/Hib is not indicated for the booster dose at age 4-6 years. ACIP recommends that the minimum interval from dose 4 to dose 5 should be at least 6 months to provide an optimum booster response. In accordance with existing recommendations, if a child misses an IPV dose at age 4-6 years, the child should receive a booster dose as soon as feasible.



# Schedule Updates

**Seasonal Influenza:** The Seasonal Influenza Schedule has been updated in NESIIS. The system will continue to recommend Influenza vaccine throughout the rest of this influenza season. Once this year's vaccine expires we will update the schedule to begin recommending influenza vaccination as of September 1, 2010 for the next season. Other updates include:

- The system will begin recommending influenza once a client turns 6 months of age and will continue recommending throughout adulthood.
- The system will recommend 2 doses for anyone under the age of 9 years that is receiving influenza vaccine for the first time.
- We are still working on making the system recommend 2 doses for anyone under the age of 9 years who received only 1 dose in their first season and are coming back the next (consecutive) season for an additional dose.

**Rabies:** The Rabies schedule has been updated in NESIIS to reflect the new 4-Dose Post-Exposure for Unvaccinated Persons series. This schedule recommends the following doses for Rabies:

- Dose 1 – Day 0
- Dose 2 – min. 3 days after Dose 1
- Dose 3 – min. 7 days after Dose 1
- Dose 4 – min. 14 days after Dose 1

**Polio:** We are in the process of updating the Polio schedule in NESIIS. Since the ACIP recommendation was made 10 years ago, three different combination vaccines containing IPV have been licensed for routine use in the United States. Because of potential confusion in using different vaccine products for routine and catch-up immunization, ACIP recommends the following:

- The 4-dose IPV series should continue to be administered at ages 2 months, 4 months, 6-18 months, and 4-6 years.
- The final dose in the IPV series should be administered at age ≥4 years regardless of the number of previous doses.
- The minimum interval from dose 3 to dose 4 is extended from 4 weeks to 6 months.
- The minimum interval from dose 1 to dose 2, and from dose 2 to dose 3, remains 4 weeks.
- The minimum age for dose 1 remains age 6 weeks.

Series: Influenza Infant (Vaccine Group: Influenza)								
Dose	Min Age	Min Rec Age	Min Overdue Age	Min Valid Interval	Min Interval Between	Rec Interval Between	Overdue Interval Between	Max Age
1	6 M	6 M						9 Y
2					28 D	42 D	70 D	
Booster					28 D	1 Y		



## Idea Time!

We want your ideas!

We know the people who are the most equipped to suggest enhancements to NESIIS are those using it in the real world!

If you have any ideas you feel would be a benefit to the system, please share them with us. You can send suggestions to the Help Desk at:

[nesiishelp@dhhs.ne.gov](mailto:nesiishelp@dhhs.ne.gov)

## Staff Contacts

Don't hesitate to contact us with any questions!

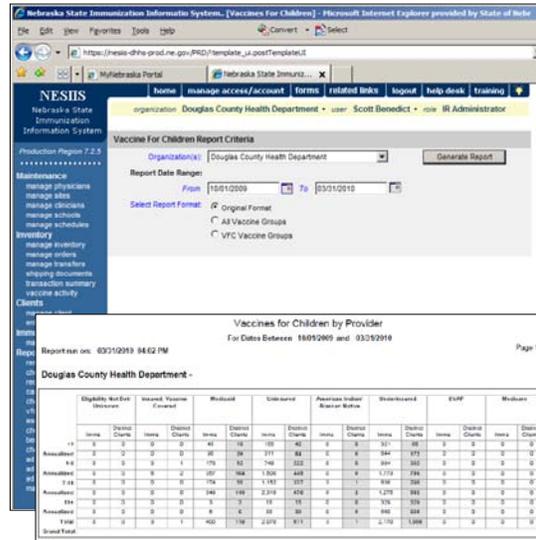
### NESIIS Coordinator

Michelle Hood  
[michelle.hood@nebraska.gov](mailto:michelle.hood@nebraska.gov)

### Help Desk Coordinator

Scott Benedict  
888.433.2510  
[nesiishelp@dhhs.ne.gov](mailto:nesiishelp@dhhs.ne.gov)

# Enhancements Coming Soon



**Immunization-based Eligibility:** Soon you will be able to adjust the insurance coverage a client has for each immunization given. At present eligibility is tied to all shots, and if you change the eligibility, all historical shots change with it.

**VFC Report Fix:** The VFC report has not been including clients whose insurance is set to Eligibility Not Det/Unknown. An upcoming fix will properly pull all clients who have received VFC-based immunizations, regardless of eligibility.

**Simplified Family Entry:** We will be changing NESIIS to allow you to add or update multiple family members without having to re-enter all demographic and responsible person information for each person every time.

**Barcode Scanning:** Users will have the ability to scan barcodes into the system for both inventory receipt and dose administration. Essentially, you'll scan the lot into NESIIS via barcode, then when you administer a dose, you scan another code to automatically fill in all immunization and lot info into the client's record.

**Flag New Inventory:** If you already have a lot number in inventory, NESIIS will notify you the number exists, allowing you to modify existing inventory rather than unnecessarily adding in a new lot.

**Client Contact Info:** You'll be able to tie an address to a specific client, separate from the responsible persons on their record.

**Modify Ad Hoc Reports:** A change to allow you to filter and show shots given to clients under each eligibility type.



Nebraska State Immunization Information System