

Flu and Pneumococcal Vaccinations 2020-2021

Utica Park Clinic
Quality Improvement Department

Objectives

- List & review available flu vaccines for 20/21 Flu Season
- Discuss Flu Recommendations related to COVID Pandemic
- Discuss Pneumonia vaccination schedules
- Define and review the 8 Rights of Safe Injection Practices
- Documentation of Flu and Pneumonia Vaccines
- Discuss vaccine storage and handling

U.S.-Licensed Influenza Vaccines Expected for 2020–21

Vaccine type	6 through 23 mos	2 through 3 yrs	4 through 17 yrs	18 through 49 yrs	50 through 64 yrs	≥65 yrs
IIV4s (egg)	Afluria Quadrivalent Fluarix Quadrivalent VFC Private FluLaval Quadrivalent VFC Private Fluzone Quadrivalent VFC					
ccIIV4 (cell)	Flucelvax Quadrivalent VFC					
RIV4 (recombinant)	Flublok Quadrivalent					
Adjuvanted aIIV3 (egg)	Fluad Private					
Adjuvanted aIIV4 (egg)	Fluad Quadrivalent NEW					
High-dose HD-IIV4 (egg)	Fluzone High-Dose Quadrivalent NEW					
LAIV4 (egg)	FluMist Quadrivalent VFC Private					

- No influenza vaccines are licensed for children under 6 months of age.
- For children 6 through 35 months of age, volume per dose is different than for older persons—refer to PI for dose volumes.
- For many people, there is more than one appropriate vaccine.
- ACIP expresses no preference for any one influenza vaccine over another where more than one is appropriate.
- All are intramuscular except for LAIV4 (intranasal).
- LAIV4 should not be used for some groups, including pregnant women and certain other populations (see ACIP statement).

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2020-2021 Flu Vaccine Matrix



Version 2 (08/24/2020)

	Age	CPT (Modifier)	Vaccine Description	Name Brand	Epic Proc Code	Amount	Lot Manager ID	Admin Code With Counseling	Admin Code Private Ins	Admin Code Medicare or Medicare Replacement	Admin Code Without Counseling SoonerCare & Medicaid	ICD-10	Outer Carton NDC	Vial/Syringe NDC	Cash Price (includes admin fee)
Vaccines For Children (VFC)	2yrs - 18yrs	90672 (SL)	Flu vaccine, quad, live, intranasal	Flumist	IMM146	0.2ml	146	90460 Counseling component admin code billed with provider visit only if indicated by the provider. 18yrs & under only.	N/A	N/A	90473	Z23	66019-0307-10	66019-0306-01	N/A
	6 mo +	90686 (SL)	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Fluarix-PFS	IMM22	0.5ml	127				Z23	58160-0885-52	58160-0885-41		
	6 mo +	90686 (SL)	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Flulaval-PFS	IMM22	0.5ml	127				Z23	19515-0816-52	19515-0816-41		
	6mo+	90686 (SL)	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Fluzone-SDV	IMM22	0.5ml	127				Z23	49281-0420-10	49281-0420-58		
	6 mo+	90686 (SL)	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Fluzone-PFS	IMM22	0.5ml	127				90471	Z23	49281-0420-50	49281-0420-88	
	4 yrs & older	90674 (SL)	Flu vaccine, quad, cell cultures, subunit, PF, antibiotic free, 0.5ml, IM	Flucelvax-PFS	IMM31	0.5ml	31				Z23	70461-0320-03	70461-0320-04		
Private Stock	6mo +	90686	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Flulaval-PFS	IMM22	0.5ml	127	90471	G0008	N/A	Z23	19515-0816-52	19515-0816-41	\$40	
	6mo +	90686	Flu vaccine, quad, split virus, PF, 0.5ml, IM	Fluarix-PFS	IMM22	0.5ml	127				Z23	58160-0885-52	58160-0885-41		
	65 yrs & older	90653	Flu vaccine, inactivated, subunit, adjuvanted, IM	Fluad TIV-PFS	IMM21	0.5ml	21	N/A	N/A	Z23	70461-0020-03	07461-0020-04			
	2yrs - 49yrs	90672	Flu vaccine, quad, live, intranasal	Flumist	IMM146	0.2ml	146	90460	90473	90473	N/A	Z23	66019-0307-10	66019-0307-01	\$60

**SoonerCare & Adult Medicaid - use NDC from vial. All other payers use NDC from outer carton.

Who should get a flu shot?

✓ 2020–21 ACIP Influenza Statement

Core recommendation (unchanged):

- Annual influenza vaccination is recommended for all persons aged 6 months and older who do not have contraindications



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Get Healthy. Stay Healthy.
Flu Vaccine Administration Record

Please Print _____

Last Name _____ First Name _____ Middle Initial _____

Date of Birth _____ Medical Record Number _____

Signature _____ Today's Date _____

Please answer the following questions by circling YES or NO

1. Are you sick today? or Do you have a fever today? YES or NO
2. Have you had wheezing in the last 12 months? YES or NO
3. Do you have a serious allergic reaction after eating (ingesting) eggs (e.g., trouble breathing or anaphylaxis)? YES or NO
4. Have you ever had a serious allergic reaction after receiving a vaccine (e.g., trouble breathing or anaphylaxis)? YES or NO
5. Have you ever had Guillain Barre Syndrome? YES or NO
6. If you are over 65 years of age, have you ever had a Pneumonia vaccination? YES or NO
 - a. If yes, when? (month / year) _____
 - b. If no, would you like to get one today? _____

If you answered yes to any of the questions above please explain:

Vaccine Type	Date of Admin.	YES Date	Injection Site	Injection Route	Vaccine Manufacturer & Lot Number	Signature / Title of Person Administering

UPIC209 (08/20)

Contraindications

Please answer the following questions by circling YES or NO

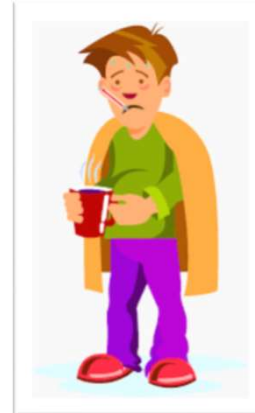
1. Are you sick today? or Do you have a fever today ? YES or NO

- People with minor illnesses, such as a cold, may be vaccinated.
- People who are moderately or severely ill should usually wait until they recover before getting influenza vaccine
- Individuals who were hospitalized with an acute illness but who are now well enough to be discharged from a hospital can be vaccinated.
- **Routine vaccination should be deferred for persons with suspected or confirmed COVID-19, regardless of symptoms**

Yes



Nope



https://www.cdc.gov/flu/professionals/vaccination/vaccine_safety.htm

Contraindications

2. Have you had wheezing in the last 12 months?

YES or NO

If not currently ill, patients can have inactivated, injectable vaccine.

Live, nasal vaccine (FluMist) is contraindicated in patients with history of wheezing in the last 12 months or who have asthma.

Yes



No



https://www.cdc.gov/flu/professionals/vaccination/vaccine_safety.htm

Contraindications

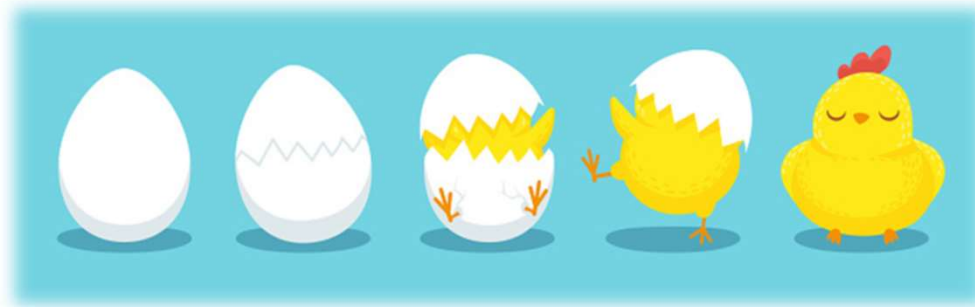
3. Do you have a serious allergic reaction after eating (ingesting) eggs (e.g., trouble breathing or anaphylaxis) ?

YES or NO

- People who have experienced ONLY hives after exposure to egg can get any licensed flu vaccine that is otherwise appropriate for their age and health
- People with egg allergies can receive one of the egg free vaccines listed below

Currently 2 Flu Vaccines without Eggs

- **Cell Based Flu Vaccine: Flucelvax Quadrivalent for ages 4 and older (VFC Stock Only)**
- **Recombinant Flu Vaccine: Flublock Quadrivalent for ages 18 and older (none in stock)**



<https://www.cdc.gov/flu/prevent/egg-allergies.htm>

Egg Allergies, continued....

- People who have symptoms *other than hives* after exposure to eggs, such as angioedema, respiratory distress, lightheadedness, or recurrent emesis;
- or who have needed epinephrine or another emergency medical intervention (after egg ingestion),
- can also get **any licensed flu vaccine** that is otherwise appropriate for their age and health,
- but the vaccine should be given in a **medical setting and be supervised by a health care provider** who is able to recognize and manage severe allergic conditions. (Settings include hospitals, clinics, health departments, and physician offices).



Mock Medical Drill

Up to Date Emergency Kit

Provider On Site

Do Not
Give In a
Drive
Through
Clinic

Contraindications

4. Have you ever had a serious allergic reaction after receiving a vaccine (e.g., trouble breathing or anaphylaxis) ?

YES or NO

- A previous severe allergic reaction to flu vaccine, regardless of the component suspected of being responsible for the reaction, is a contraindication to future receipt of the vaccine.

No

Refer to the patient to his or her provider to review the potential component that caused the reaction. Encourage the patient to practice Healthy Habits to help prevent flu: <https://www.cdc.gov/flu/prevent/actions-prevent-flu.htm>.

Influenza Vaccine Package Inserts:

<https://www.fda.gov/vaccines-blood-biologics/safety-availability-biologics/influenza-virus-vaccine-safety-availability>

Contraindications

5. Have you ever had Guillain Barre Syndrome ?

YES or NO



- Guillain-Barré syndrome (GBS) is a rare disorder where the body's immune system damages nerve cells, causing muscle weakness and sometimes paralysis. Most people fully recover from GBS, but some have permanent nerve damage.
- In 1976, there was a small increased risk of GBS after swine flu vaccination. The data on an association between seasonal influenza vaccine and GBS have been variable from season-to-season. When there has been an increased risk, it has consistently been in the range of **1-2 additional GBS cases per million** flu vaccine doses administered.
- **A patient with a history GBS within 6 weeks of a previous dose of an influenza vaccine should be referred to a doctor before receiving a future influenza vaccine.**

https://www.cdc.gov/flu/professionals/vaccination/vaccine_safety.htm

Contraindications

If you answered yes to any of the questions above please explain:

Document
Actions &
Follow Up





FluMist: Contraindications

LAIV should NOT be administered to the following:

- Children aged <2 years of age.
- Adults aged ≥ 50 years of age.
- Individuals with a history of severe allergic reaction to any component of the vaccine or to a previous dose of any influenza vaccine.
- People who are allergic to eggs.
- Children or adolescents ages 2 through 7 years of age receiving aspirin or other salicylates (because of the association of Reye syndrome with wild-type influenza virus infection).
- Pregnant women.
- Individuals with known or suspected immunodeficiency diseases or immunosuppressed states (including those caused by HIV).
- Children 2 through 4 years of age who have asthma or who have had a wheezing episode noted in their medical record within the past 12 months, or for whom parents report that a health care provider stated that they had wheezing or asthma within the last 12 months.
- Individuals who have taken **influenza antiviral medications within the previous 48 hours**
- Persons who care for severely immunosuppressed persons who require a protective environment, or these individuals should avoid contact with such persons for 7 days after receipt.



FluMist: Precautions

In general, vaccinations should be deferred when a precaution is present. However, a health care provider may determine that vaccination is indicated in the presence of a precaution because the benefit of protection from the vaccine outweighs the risk for an adverse reaction. The following are [precautions for LAIV](#):

- [GBS](#) within 6 weeks of a previous dose of an influenza vaccine (IIV or LAIV)
- Presence of a moderate or severe acute illness with or without a fever.⁵ Individuals who were hospitalized with an acute illness but who are now well enough to be discharged from a hospital can be vaccinated.
- Asthma in children aged 5 years and older.

Individuals who have other medical conditions that place them at increased risk for complications from influenza, including:

- Other chronic disorders of the pulmonary or cardiovascular system (except hypertension)
- Neurological/neuromuscular diseases
- Metabolic disease, such as diabetes mellitus
- Renal or hepatic dysfunction
- Hematologic disorders, such as hemoglobinopathies

Persons with Suspected or Confirmed COVID-19

- Routine vaccination should be deferred for persons with suspected or confirmed COVID-19, regardless of symptoms.

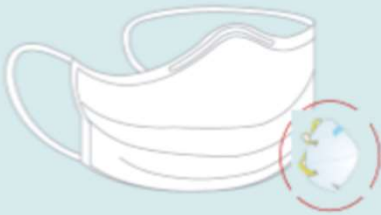


<https://www.cdc.gov/vaccines/pandemic-guidance/index.html>

Recommended = REQUIRED

Use Personal Protection Equipment

Face mask



- **Recommended:** All health care providers (N95 masks not recommended)

Eye protection



- **Recommended:** Areas of moderate/substantial community transmission
- **Optional:** Areas of minimal/no community transmission

Gloves

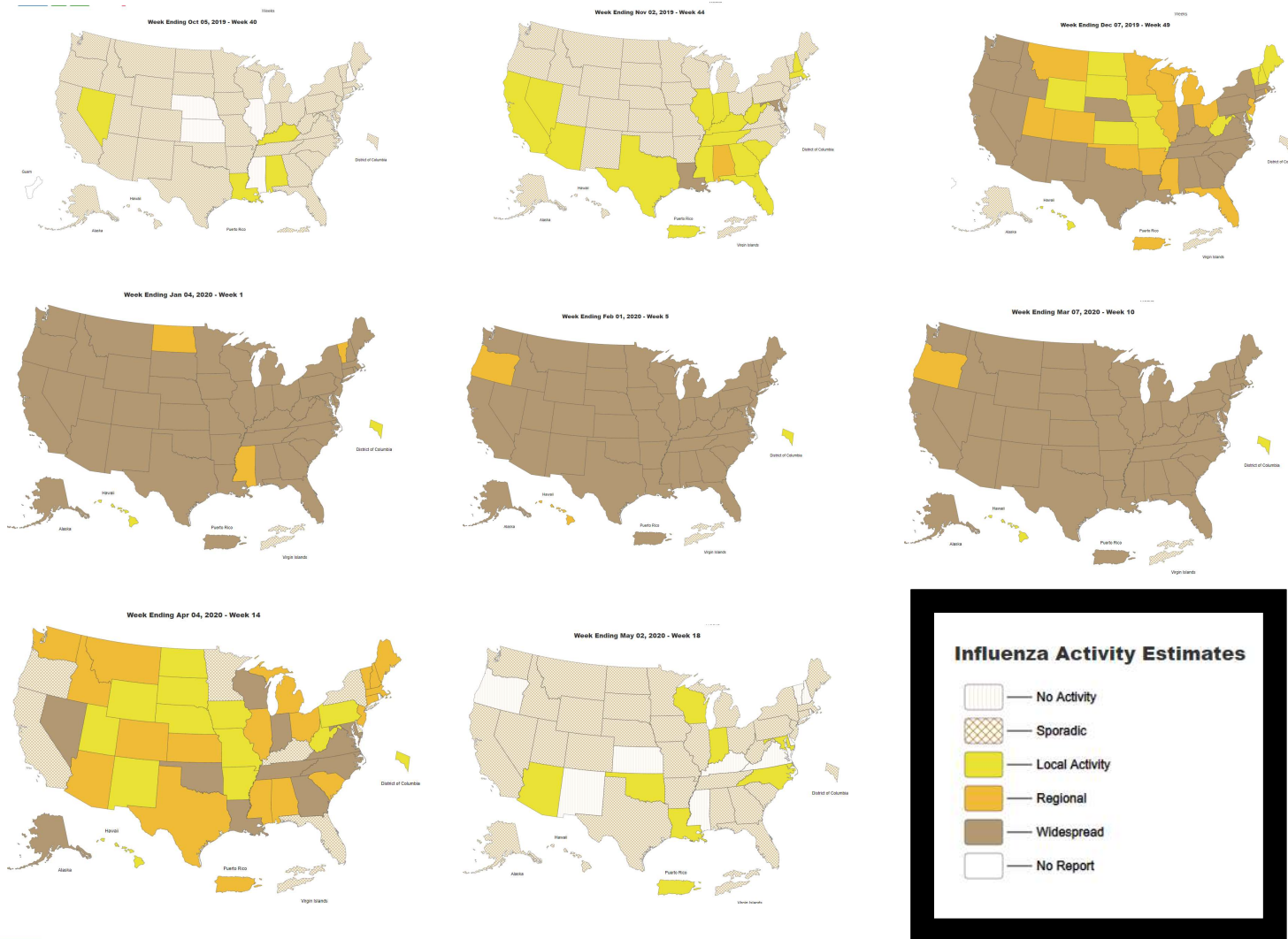


- **Recommended:** intranasal or oral vaccines
- **Optional:** intramuscular or subcutaneous vaccines

<https://www.cdc.gov/vaccines/pandemic-guidance/index.html>; Image credit: Pan American Health Organization

CDC Flu View
A Weekly Influenza Surveillance Report Prepared by the Influenza Division
2019-2020

<https://gis.cdc.gov/grasp/fluview/FluView8.html>



Southern Hemisphere Influenza Activity

- Southern Hemisphere influenza activity has been reported at much lower rates than is typical.
- Fewer countries are reporting data, and fewer viruses are being detected in general.
- Influenza A(H1N1)pdm09, influenza A(H3N2), and influenza B/Victoria viruses have co-circulated.
- Social distancing and other preventive measures to reduce spread of SARS-CoV-2 may also have helped reduce spread of influenza viruses.
- The COVID-19 pandemic also has influenced health-seeking behaviors and testing priorities and capacities, making interpretation challenging.

Upcoming 2020–21 U.S. Influenza Season

- It is unclear what impact the ongoing COVID-19 pandemic will have on the upcoming influenza season in the U.S.
 - There may be less influenza than usual because of social distancing and other measures to reduce COVID-19.
 - Influenza viruses and SARS-CoV-2 may co-circulate.
 - People may be co-infected with influenza and SARS-CoV-2.
- Presence of SARS-CoV-2 and influenza at the same time could place tremendous burden on the health care system and result in many illnesses, hospitalizations, and deaths.



2020-2021 Influenza Vaccination Recommendations and Clinical Guidance during the COVID-19 Pandemic https://emergency.cdc.gov/coca/calls/2020/callinfo_082020.asp

Topic: Testing and Treatment of Seasonal Influenza During the COVID-19 Pandemic

Date: Thursday, September 17, 2020

Time: 1:00-2:00 PM

Website: <https://emergency.cdc.gov/coca/calls/2020>

(further details coming soon)

Pneumonia Vaccines

When you give flu, think Pneumonia TOO!

PPSV23 protects against 23 types of bacteria that cause pneumococcal disease.

PPSV23 is recommended for:

- **All adults 65 years or older,**

Most people need only one dose of PPSV23. A second dose of PPSV23, and another type of pneumococcal vaccine called PCV13, are recommended for certain high-risk groups. Your health care provider can give you more information.

People 65 years or older should get a dose of PPSV23 even if they have already gotten one or more doses of the vaccine before they turned 65.

<https://www.cdc.gov/vaccines/hcp/vis/vis-statements/ppv.html>

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Validate *before* you Vaccinate

- Right Physician Order
- Right Patient
- Right Vaccine
- Right Time
- Right Dose
- Right Route
- Right Technique
- Right Documentation

If there is *no documented or standing*
physician-APP order

DO NOT ADMINISTER VACCINE!

Right Physician Order

If there is **no documented or standing order**...

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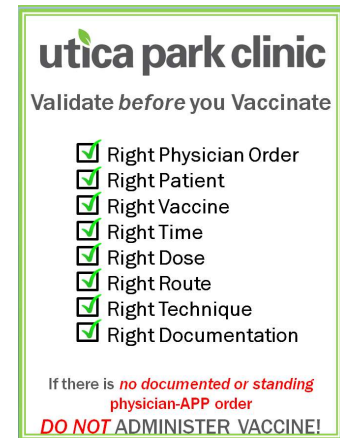
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DO NOT ADMINISTER!

Right Patient

- Verify the patient's name and date of birth
 - Ask patient to state name and date of birth
 - Cross reference patient's name and date of birth by the patient consent form and order if applicable
- Contraindications & Precautions: Any No's should be Reviewed and documented
- Provide the patient with a printed or electronic copy of the VIS (Vaccine Information Statement) form.
- <https://www.cdc.gov/vaccines/hcp/vis/current-vis.html>

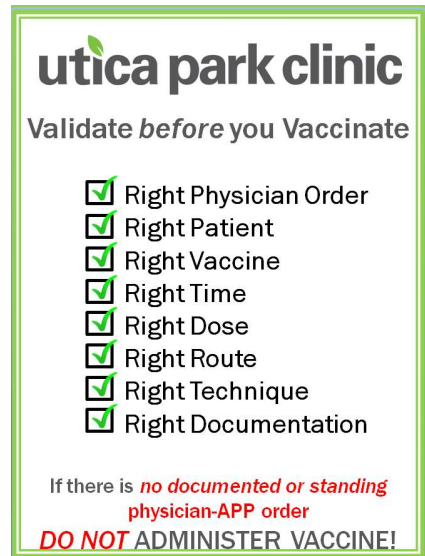


Right Vaccine

- Verify vaccine on label
- Verify expiration date
- “Three Point Check” should be performed when;
 - When retrieving the vaccine
 - When preparing the vaccine
 - Before administering the vaccine

Never administer a vaccine or medication prepared by another person

Never administer a vaccine or medication that is not labeled.



Look Alike, Sound Alike! Proceed with Caution!



Right Time

- Verify the CDC Vaccine Guidelines
- Verify the patient's immunization history and records
- Cross reference OSIS patient records & Care Everywhere



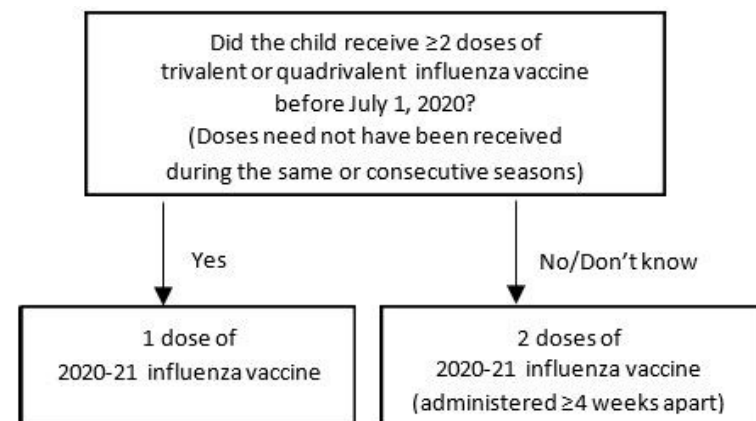
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Influenza: Number of Doses for Children Aged 6 Months through 8 Years

- Determine the number of doses needed based on child's age at time of first dose of 2020–21 influenza vaccine and number of doses of influenza vaccine received in previous seasons
 - For children aged 6 months through 8 years, determine the number of doses needed as chart indicates.
 - For children needing two doses, the second dose is recommended even if the child turns age 9 years between dose 1 and dose 2.
 - Persons aged ≥ 9 years need only one dose for 2020-21.
 - Children aged < 6 months should not receive influenza vaccine.



Right Dose

Volume per Dose for Children and Adults

• Four IIV4s are licensed for ages 6 through 35 months. Dose volumes differ for these vaccines for this age group. Children aged 6 through 35 months may receive (intramuscularly):

- ~~0.25mL of Afluria Quadrivalent~~, or
- 0.5mL of Fluarix Quadrivalent, or
- 0.5mL of FluLaval Quadrivalent, or
- **Either** 0.25mL **or** 0.5 mL of Fluzone Quadrivalent (**note**; 0.25mL prefilled syringes will not be available for 2020-21).

• Children aged 3 through 17 years may receive 0.5mL of an age-appropriate intramuscular IIV formulation.

• Adults aged ≥ 18 years may receive an age-appropriate intramuscular IIV or RIV4. The correct adult dose volume is 0.5mL for RIV4 and all IIVs **except** HD-IIV4, for which it is 0.7mL.

• If a 0.25mL intramuscular dose is administered to a person ≥ 36 months of age:

- If the error is discovered immediately, administer the remaining additional volume needed to provide a full dose.
- If the error is discovered later (after the recipient has left the vaccination setting), a full dose should be administered as soon as the recipient can return.

• Healthy non-pregnant persons (see **LAIV4 Contraindications and Precautions**, page 4) aged 2 through 49 years may alternatively receive 0.2mL of LAIV4 intranasally (0.1mL per nostril, using the supplied sprayer).

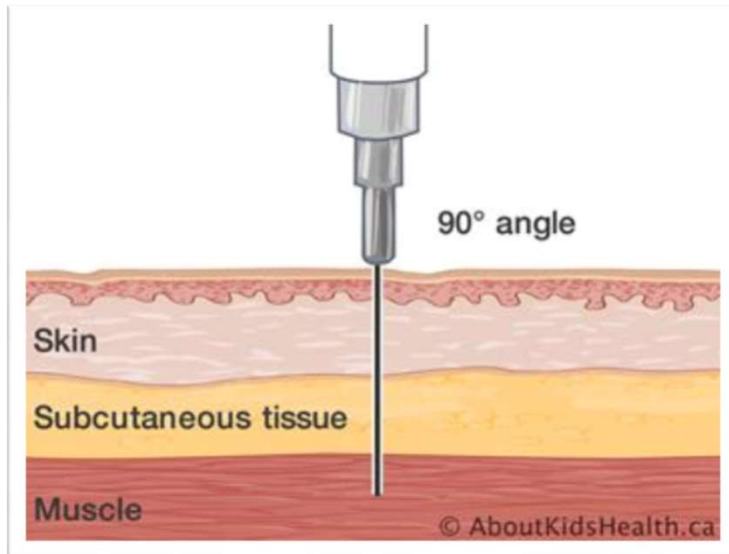
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Validate *before* you Vaccinate

- Right Physician Order
- Right Patient
- Right Vaccine
- Right Time
- Right Dose
- Right Route
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- Right Documentation

If there is **no documented or standing physician-APP order**
DO NOT ADMINISTER VACCINE!

Right Route



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Validate *before* you Vaccinate

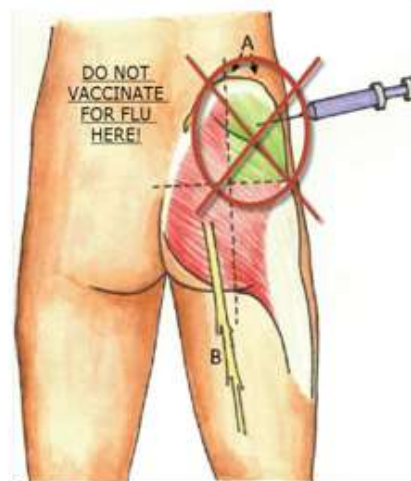
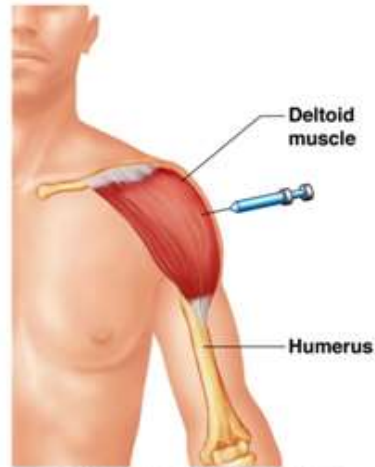
- Right Physician Order
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If there is *no documented or standing*
physician-APP order

DO NOT ADMINISTER VACCINE!

- Flu & Pneumonia Vaccines are administered Intramuscular at 90 degree angle with at least a 1 inch needle

Right Site



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DO NOT ADMINISTER VACCINE!

Vaccine Dosage & Administration

Questions & Answers from CDC to UPC

What is the proper injection route and site for *influenza* and *Pneumococcal* vaccine administration?

Route:

- *Inactivated influenza* vaccine is administered intramuscularly.
- *Pneumococcal polysaccharide (PPSV 23)* vaccine may be administered intramuscularly or subcutaneously, while *pneumococcal conjugate (PCV 13)* vaccine is administered intramuscularly.


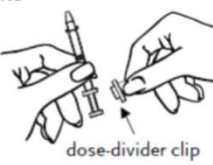
Site:

- The primary injection site for adults and children greater than three years old is the **deltoid** muscle of the upper arm
- The secondary injection site is the **vastus lateralis** muscle of the thigh.
- The **dorsogluteal** muscle (upper buttock muscle) should **not** be used as the vaccine is not properly absorbed when given at this site.

Right Route

Intranasal administration (NAS)

Live Attenuated Influenza Vaccine (LAIV)

- 1 FluMist (LAIV) is for intranasal administration only. Do not inject FluMist.
- 2 Remove rubber tip protector. Do not remove dose-divider clip at the other end of the sprayer.
- 3 With the patient in an upright position, place the tip just inside the nostril to ensure LAIV is delivered into the nose. The patient should breathe normally. 
- 4 With a single motion, depress plunger as rapidly as possible until the dose-divider clip prevents you from going further. 
- 5 Pinch and remove the dose-divider clip from the plunger.
- 6 Place the tip just inside the other nostril, and with a single motion, depress plunger as rapidly as possible to deliver the remaining vaccine.
- 7 Dispose of the applicator in a sharps container.

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DO NOT ADMINISTER VACCINE!



****wear mask, gloves, eye protection when administering FluMist, patient can wear mask covering mouth****

Right Technique

INJECTION SAFETY CHECKLIST

The following Injection Safety checklist items are a subset of items that can be found in the *CDC Infection Prevention Checklist for Outpatient Settings: Minimum Expectations for Safe Care*.

The checklist, which is appropriate for both inpatient and outpatient settings, should be used to systematically assess adherence of healthcare providers to safe injection practices. Assessment of adherence should be conducted by direct observation of healthcare personnel during the performance of their duties.

Injection Safety	Practice Performed?	If answer is No, document plan for remediation
Proper hand hygiene, using alcohol-based hand rub or soap and water, is performed prior to preparing and administering medications.	Yes No	
Injections are prepared using aseptic technique in a clean area free from contamination or contact with blood, body fluids, or contaminated equipment.	Yes No	
Needles and syringes are used for only one patient (this includes manufactured prefilled syringes and cartridge devices such as insulin pens).	Yes No	
The rubber septum on a medication vial is disinfected with alcohol prior to piercing.	Yes No	
Medication vials are entered with a new needle and a new syringe, even when obtaining additional doses for the same patient.	Yes No	
Single-dose or single-use medication vials, ampules, and bags or bottles of intravenous solution are used for only one patient.	Yes No	
Medication administration tubing and connectors are used for only one patient.	Yes No	
Multi-dose vials are dated by healthcare when they are first opened and discarded within 28 days unless the manufacturer specifies a different (shorter or longer) date for that opened vial. Note: This is different from the expiration date printed on the vial.	Yes No	
Multi-dose vials are dedicated to individual patients whenever possible.	Yes No	
Multi-dose vials to be used for more than one patient are kept in a centralized medication area and do not enter the immediate patient treatment area (e.g., operating room, patient room/cubicle). Note: If multi-dose vials enter the immediate patient treatment area, they should be dedicated for single-patient use and discarded immediately after use.	Yes No	

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Validate *before* you Vaccinate

- Right Physician Order
- Right Patient
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If there is *no documented or standing physician-APP order*

DO NOT ADMINISTER VACCINE!

The *One & Only Campaign* is a public health effort to eliminate unsafe medical injections. To learn more about safe injection practices, please visit www.cdc.gov/injectionsafety/1anonly.html.



Right Documentation

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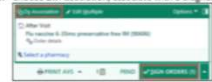
Tip Sheet

Ordering and Administering Flu Vaccines

Use the **Visit Taskbar** to search for and order the flu vaccine. After placing the order use the **Immunization** activity to document the administration of the immunization.

Try It Out

- Go to the **Visit Taskbar** and search for the flu vaccine.
- Locate the vaccination in the **sleeping cart**.
- Choose **Dx Association**, associate with a diagnosis (Z23.), and sign the order.



- Go to the **Immunization** activity, and select the **Administer** button.



- HINT:** Go to **More** activity, and select the star to save as a favorite. Fill in all the required information with hard stops, and select **Accept**.



- Complete additional **allergy/illness** and **VFC** questions.

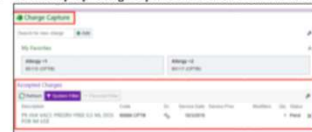


Tip: Adult patients always select "Not a VFC" patient. VFC vaccines are given to pediatric patients or **IMPORTANT:** If patient answers yes to any of the questions, then **STOP**. Do not give the vaccine! Consult the provider.

- The immunization information will be listed under **Administration History**.



- Go to **Wrap-Up-Charge Capture** and click on the immunization details.



- Enter the provider's name in the **Billing Provider** and **Service Provider** sections and select **Accept**.



HINT: If the order was not associated with a diagnosis when it was ordered it can be entered here.

You Can Also...

- Save the flu vaccine to your favorites by clicking on the star before you sign the order.
- Enter historical documentation of a flu shot from another facility in the **Immunization** activity by clicking the arrow next to the **Historical Admins** and selecting **Single Historical Immunization**.



Vaccine Storage and Handling

- Proper temperatures for storing all Flu & Pneumococcal Vaccines is 36 degrees F- 46 degrees F
- Fluarix, FluLaval, Flu Mist, and Fluad are Light-Sensitive
- Both Pneumococcal Vaccines are NOT Light-Sensitive
- If you suspect that temperatures have been out of range please report to the clinic manager & e-mail upcqi@hillcrest.com.
- Verify your Vaccine Management Plans are Up to Date <https://fastlane.ahs.com/sites/upcwpc/qi/AI/Pages/default.aspx>

Questions?



UPC

QI Clinical Education Department

upcqi@hillcrest.com