



Grant County Health District – Always Working for a Healthier and Safer Grant County

Ephrata Office County Courthouse
PO Box 37, Ephrata, WA 98823
509-754-6060

Moses Lake Office
1038 West Ivy Suite 1, Moses Lake WA 98837
509-766-7960

FOR IMMEDIATE RELEASE

02/25/09

TO: Emergency Rooms in Grant County
Walk-in, Urgent Care Clinics in Grant County
Healthcare Providers in Grant County
Healthcare Emergencies Alliance

FOR INFORMATION CONTACT

Alexander Brzezny, MD, MPH, Grant County Health Officer
Peggy Grigg, RN, BSN, Director of Personal Health Services/Administrator

- GRANT COUNTY PUBLIC HEALTH ALERT -

Varicella Cases in Moses Lake

Exclusions will begin on February 27, 2009.

Grant County Health District is working with Longview Elementary School in Moses Lake regarding chickenpox cases, in 4 separate classrooms. Additional schools have reported single cases at this time.

- Documentation of OR receipt of second dose varicella vaccinations is being required of 36 students in identified classrooms at Longview Elementary; these students will be excluded from participation in school and school activities beginning Friday, **February 27, 2009**. Some students will be excluded through March 6, and others will be excluded through March 12, if they do not receive their second dose of vaccine.
- Your practice may be receiving calls from your patients who are in need of this vaccine. We thank you in advance for your assistance in assuring that they are properly vaccinated.

Appropriate vaccination intervals between dose 1 and dose 2 are:

1. 3 months for persons aged 12 months through 12 years, and
2. 4 to 8 weeks for persons aged ≥ 13 years.

Contraindications and precautions to use of varicella vaccine are available at:

www.cdc.gov/mmwr/preview/mmwrhtml/00042990.htm

Documentation of Immunity includes the following:

- Documentation of ***TWO DOSES*** of varicella vaccine, or documentation of the first dose and the interval has not yet passed to make the individual eligible for the second, OR
- Blood tests that show immunity to varicella or laboratory confirmation of prior disease, OR
- Born in the United States before 1980 (unless the person is sure they did not have chickenpox), excluding healthcare workers, pregnant women, and immunocompromised persons (these individuals need to meet one of the other criteria for evidence of immunity).
- Receipt from a healthcare provider of
 - a) a diagnosis of chickenpox or

- b) verification of a history of chickenpox.
- Receipt from a healthcare provider of
 - a) a diagnosis of herpes zoster (shingles) or
 - b) verification of a history of herpes zoster (shingles).
- Current school rules for students in 1st-12th grade continue to allow parent report of history varicella disease. Parent report of history is not acceptable for Kindergarten students.

See <http://www.doh.wa.gov/cfh/Immunize/documents/varimplementplan.pdf> for information on school rules in Washington State.

Health Care Workers

Healthcare institutions should establish protocols and recommendations for screening and vaccinating healthcare workers and for management of healthcare workers after exposure in the workplace.

For healthcare workers, evidence of immunity is similar to the above and includes any of the following:

- Documentation of two doses of varicella vaccine;
- Blood tests showing immunity to varicella or laboratory confirmation of prior disease; or
- Receipt from a healthcare provider of
 - a) a diagnosis of chickenpox or herpes zoster (shingles); or
 - b) verification of a history of chickenpox or herpes zoster (shingles).
- Birth before 1980 is **not** considered evidence of immunity for HCPs because of the potential for nosocomial transmission of varicella to high-risk patients.

Other information regarding varicella vaccination includes the following:

Varicella vaccination of HIV-infected children. Asymptomatic or mildly symptomatic HIV-infected children aged ≥ 12 months with age-specific CD4+ Tlymphocyte counts $\geq 15\%$ and without evidence of varicella immunity should receive two doses of varicella vaccine 3 months apart. Varicella vaccine was previously recommended for asymptomatic or mildly symptomatic HIV-infected children with age specific CD4+ T-lymphocyte counts $\geq 25\%$.

(<http://www.cdc.gov/mmwr/PDF/rr/rr4806.pdf>)

Prenatal assessment and postpartum vaccination. Women should be assessed prenatally for evidence of varicella immunity. Upon completion or termination of their pregnancies, women who do not have evidence of varicella immunity should receive the 1st dose of varicella vaccine before discharge from the healthcare facility. The 2nd dose should be administered 4 to 8 weeks later (at the postpartum or other healthcare visit). Standing orders are recommended for healthcare settings where completion or termination of pregnancy occurs to ensure administration of varicella vaccine.

General varicella information is available at: www.cdc.gov/vaccines/vpd-vac/varicella/vac-faqs-gen.htm#immunity