



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Mary T. Bassett, M.D., M.P.H.
Commissioner

2018 Advisory # 2: Influenza Advisory

- **New York State has declared an influenza public health emergency**
- **In addition to vaccinating adults, pharmacists may now also temporarily administer flu vaccines to children between 2 and 17 years of age with an appropriate non-patient specific standing order**
- **Flu vaccination is recommended for all persons 6 months of age and older**
- **All healthcare personnel should receive a flu vaccination**
- **Antiviral treatment is recommended as early as possible for patients with confirmed or suspected influenza who are hospitalized, seriously ill, or ill and at high risk of serious influenza-related complications**

Please distribute to staff in the Departments of Critical Care, Emergency Medicine, Family Practice, Geriatrics, Internal Medicine, Infectious Disease, Infection Control, Obstetrics, Pediatrics, Pulmonary Medicine, Pharmacy, and Laboratory Medicine

January 30, 2018

Dear Colleagues,

On January 25, 2018, Governor Andrew Cuomo declared an influenza public health emergency for New York State (NYS). In addition to administering flu vaccines to adults, licensed pharmacists are now temporarily allowed to administer flu vaccines to children between 2 and 17 years of age with an appropriate non-patient specific standing order.

The New York City (NYC) Department of Health and Mental Hygiene (DOHMH) reminds clinicians that it is not too late in the season to administer flu vaccine and that, when indicated, antiviral medications should be used for influenza treatment and prophylaxis

Influenza activity in NYC remains elevated and robust, as expected during a season when influenza A (H3N2) viruses predominantly circulate (Figure). During the past surveillance week, 5.3% of outpatient visits were for influenza-like illness (ILI), and 30% of specimens submitted for respiratory virus testing were positive for influenza. During past seasons when H3N2 viruses have predominated, higher overall and age-specific hospitalization rates and increased mortality have been observed, especially among older people, very young children, and persons with certain chronic medical conditions, compared with seasons during which influenza A (H1N1) or influenza B viruses have predominated. Weekly updates on current NYC influenza activity may be found at <http://www1.nyc.gov/site/doh/health/health-topics/flu-seasonal-surveillance-data.page>.

Flu Vaccine Recommendations and Supply

Flu vaccine coverage levels in NYC are below the Healthy People 2020 Goals for all age groups. A recommendation from a clinician is the most important factor in determining whether someone is vaccinated. Annual flu vaccination is recommended for all persons 6 months and older. Anyone who has not yet been vaccinated this season should get a flu vaccine now.

If you need more vaccine, flu vaccine is still available for purchase although some specific products may not be available. For a list of available products and where to purchase them, visit <http://www.izsummitpartners.org/ivats/>. DOHMH still has Vaccines for Children (VFC) vaccine available for enrolled providers. Providers enrolled in the VFC program who need to order additional vaccine or have questions about their flu vaccine order, can visit www.nyc.gov/health/cir to log onto the Online Registry to place or track a request. You may also send an e-mail to nycimmunize@health.nyc.gov. If you do not have flu vaccine or cannot buy additional doses, refer your patients to a pharmacy for vaccination. Most chain pharmacies have vaccine and will be able to vaccinate children, although they likely do not have vaccine for children under 3 or 4 years of age. DOHMH has limited information about small retail pharmacies. We suggest checking with those pharmacies near your practice.

Detailed information on influenza prevention and control, including flu and pneumococcal vaccine recommendations, is available in DOHMH's City Health Information: Influenza Prevention and Control, 2017-2018 publication <https://www1.nyc.gov/assets/doh/downloads/pdf/chi/chi-36-5.pdf>. For further information on ordering vaccine, vaccine supply, standing orders, sample refusal forms, high-risk groups, patient education materials, and additional resources to promote influenza vaccination, please visit <http://www1.nyc.gov/site/doh/providers/health-topics/immunization-information-for-healthcare-providers.page>.

Influenza Vaccination for Healthcare Personnel

Annual flu vaccination of all healthcare personnel is considered the standard of care. NYS Public Health Law requires all healthcare facilities and agencies licensed under Articles 28, 36 or 40 to document their healthcare personnel influenza vaccination status and to require healthcare personnel who do not receive flu vaccine to wear a mask through the period that the NYS Health Commissioner deems influenza to be prevalent. On December 13, 2017, the NYS Health Commissioner declared influenza to be prevalent statewide (https://www.health.ny.gov/diseases/communicable/influenza/seasonal/providers/prevention_of_influenza_transmission/).

Influenza Antiviral Medications

One of three influenza antiviral medications - oseltamivir (Tamiflu), zanamivir (Relenza), or peramivir (Rapivab) - should be used for treating influenza infections, especially in persons at high risk for serious complications of influenza infection. Peramivir is only available as an IV formulation and is approved for use in persons two years of age and older. Only oseltamivir and zanamivir are approved for prophylaxis. Zanamivir should not be used in persons with underlying airways disease, such as asthma or COPD. Antiviral treatment should be started as early as possible for any patients with confirmed or suspected influenza who are hospitalized, seriously ill, or ill with a high risk of serious influenza-related complications. The latter group includes:

- Persons over 65 or under 2 years of age
- Pregnant women, or those who have given birth within the previous 2 weeks
- Persons with diabetes, chronic lung (e.g., asthma), heart, kidney, liver, or blood disorders, neurological disorders compromising respiration, history of stroke, morbid obesity (i.e., body-mass index ≥ 40), or who are immunocompromised (e.g. HIV, AIDS and/or cancer)
- Persons under 19 years of age who are on long-term aspirin therapy

Treatment should begin as soon as influenza is suspected, regardless of vaccination status or rapid test results, and should not be delayed for confirmatory testing. Further recommendations on the use of antiviral drugs are available at:

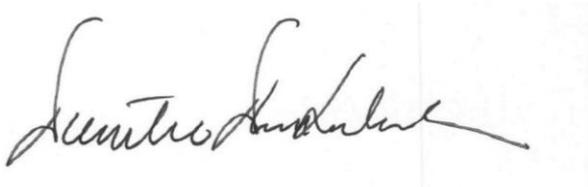
<http://www1.nyc.gov/site/doh/health/health-topics/flu-seasonal-treatment.page>
<http://www.cdc.gov/flu/professionals/antivirals/index.htm>

Reporting of Flu Vaccine Doses Administered

Providers must report all doses of vaccine administered to children less than 19 years of age to the Citywide Immunization Registry (CIR). Providers administering vaccines to adults 19 years and older can also report these doses to the CIR, provided they obtain verbal or written consent to do so. For more information, please visit www.nyc.gov/health/cir. Additionally, effective October 2014, pharmacists and registered nurses in NYS must report all vaccines administered to adults 19 years and older to the CIR, with the patient’s verbal or written consent. Information on the reporting requirement is available at:

http://www.health.ny.gov/prevention/immunization/information_system/laws_and_regulations/docs/notification_letter.pdf

Sincerely,



Demetre Daskalakis, MD, MPH
Deputy Commissioner, Division of Disease Control

Figure.

Weekly influenza-like illness (ILI), all ages emergency department (ED) visits in New York City
From November 10, 2001 - January 20, 2018

