



EMS Section of The International Association of Fire Chiefs

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Flu Vaccine Options for 2013/2014 – Boost Your Department Participation

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CDC and OSHA require all employers of healthcare providers offer **free** flu shots to their staff. It is well documented that seasonal flu shots promote wellness and decrease absenteeism.

As many of you already know, many medical facilities have mandated flu vaccination as a condition of employment. This is viewed as a patient safety issue. Some allow employees to sign a declination form, but require those who do so to wear a surgical mask for their entire shift. This proactive approach is now finding its way to fire/EMS providers. Medical facilities are asking for lists of unvaccinated EMS providers and requiring them to wear a surgical mask on entry to the facility.

Reasons for declining flu vaccination vary:

- I don't like needles;
- I don't want to put a virus into my body, living or dead;
- I have an allergy to eggs; and
- I get the flu when I take a flu shot

These concerns are now moot with new flu vaccines available this season. Unfortunately, the news has not gotten out in time for many departments to select the vaccine most suited to their members concerns. But, here is information on each of the new vaccines. This year there are six different ways to be protected:

First, we have the standard **trivalent vaccine** that contains two type A strains and one type B influenza strain that the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) predicted would be the main cause of influenza this flu season.

Second, there is a **Quadrivalent vaccine** that has two type A strains and two type B strains. The additional type B strain is one that often infects children and this vaccine will be offered mainly to children.

Third, **Fluzone High-Dose** is for seniors age 65 and older. This vaccine contains four times the amount of antigen than a normal flu shot, creating a more robust immune response, which equals better protection.

Fourth, **Fluzone Intradermal** is for persons who do not like “big” needles. This vaccine is given with a tiny micro-needle and injects just under the skin.

Fifth, **Flucelax** is a vaccine that is not egg derived, so individuals with egg allergies can safely be vaccinated. Additionally, this vaccine has no mercury or antibiotic preservative.

Sixth, **FluBlok** is a “wave of the future” vaccine. It is DNA-based (not derived from eggs) and does not contain virus, living or dead and is available for persons up to 49 years of age. It contains flu viral DNA that, when injected into a person, generates protection from influenza using the individual’s own immune response. In the future, all vaccines will probably use this type of technology. An added benefit is a much more rapid production cycle since the vaccine is not grown in eggs which also means that it does not contain trace amounts of antibiotics (used to prevent bacterial contamination during manufacturing) or thimerosal (ethylmercury) added as a preservative.

You may be wondering: what happened to **FluMist**? It is still available but is only recommended for persons aged 2 to 49. For people in this age range who want nothing to do with shots, this nasal spray vaccine remains an option.

Flu shots for healthcare personnel should begin in mid-September. In December, department leadership should assess participation and survey why those who did not participate to determine why. This will be valuable information for next years’ planning.

Remember, declination forms are required for all members who refuse vaccination, in accordance with NFPA 1581, CDC, and OSHA. Declination forms help to demonstrate that the employer met their responsibility to offer the vaccine. A declination does not remove any employee rights.

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