

To: Local Health Departments, Medical Providers, and Disaster Responders

From: New York State Department of Health

Date: September 2, 2011

Re: Guidance on Immunizations for Hurricane Irene Emergency Responders, Volunteers, and the Public

Many local health departments (LHDs) are being contacted by individuals who are responding to the Hurricane Irene disaster or the public who want information on needed vaccinations and/or immunization services. The information below is to provide guidance to LHDs on the recommended immunizations for emergency responders, volunteers, and the public.

1. Recommended Immunizations for Emergency Responders and Volunteers

To create these recommendations the New York State Department of Health (NYSDOH) utilized the Centers for Disease Control and Prevention's (CDC) Immunization Recommendations for Disaster Responders. This document can be found at:

<http://www.bt.cdc.gov/disasters/disease/responderimmun.asp>.

Recommended immunizations for Hurricane Irene adult emergency responders and volunteers are as follows:

- Tetanus diphtheria toxoid and acellular pertussis (Tdap) or tetanus diphtheria toxoid (Td), if not up to date on the primary series or have not received a booster with Td or Tdap in the last 10 years. If history is unknown, Td or Tdap can be received without concern about the interval from the last dose. Tdap is preferred because of the additional protection conferred against pertussis.
- Three appropriately spaced doses of Hepatitis B vaccine for persons who will be performing direct patient care or otherwise expected to have contact with bodily fluids. A booster for previously vaccinated responders or volunteers is not recommended, nor is Hepatitis B vaccine recommended for disaster responders or volunteers who do not have contact with human blood or bodily fluids.

There is no indication for the following vaccines given the anticipated conditions in the region:

- Hepatitis A vaccine (low probability of exposure, even under these conditions, in the U.S.). No transmission from contaminated water has been identified in the U.S. since the 1980's. Hepatitis A outbreaks have not occurred following other hurricanes or floods in other parts of the country, including the devastating hurricanes in Florida several years ago, Hurricane Katrina, and the Midwestern floods of the late 1990's. New York State has had few hepatitis A cases in recent years. Even though the water and sewage systems are damaged or out of operation in many areas of New York State, the risk of a hepatitis A epidemic is extremely low. Vaccine will take at least one to two weeks to provide substantial immunity.

- Typhoid vaccine (low probability of exposure in the U.S., even under these conditions).
- Cholera vaccine (low probability of exposure in the U.S., even under these conditions, plus no licensed cholera vaccine available in the U.S.).
- Meningococcal vaccine (no expectation of increased risk of meningococcal disease among emergency responders).
- Rabies vaccine series (the full series is required for protection). Persons who are exposed to potentially rabid animals should be evaluated and receive standard post-exposure prophylaxis, as clinically appropriate.

2. Recommended Immunizations for the Public

Local health departments and medical providers can offer Tdap or Td to members of the public who are concerned about their susceptibility to tetanus when repairing homes or businesses.

3. Documentation

It is critical that all vaccines administered be properly documented. Immunization cards or records should be provided to individuals at the time of vaccination. Questions about immunization schedules, documentation, or procedures should be directed to the NYSDOH Bureau of Immunization at 518-473-4437.

4. Billing and Reimbursement Questions for Responder/Volunteer Immunizations

Questions about billing or reimbursement for vaccines provided to Hurricane Irene responders or volunteers should be directed to the NYSDOH Bureau of Immunization at 518-473-4437.