

Chicago Department of Public Health (CDPH) Hepatitis A Vaccination Programs for Emergency Departments (ED): Frequently Asked Questions (FAQs)

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1. How do we receive public hepatitis A vaccines from CDPH?

If your hospital is already receiving publicly purchased vaccines (i.e. birth dose hepatitis B vaccine, vaccines in the pharmacy) then a refrigerator has already been certified to receive public vaccines. Vaccine could be shipped to this location, stored alongside other vaccines in your pharmacy, and then safely transported to and administered in the ED. CDPH refrigerator temperature logs are attached with additional instructions. Please contact the Chicago Department of Public Health (CDPH) Immunization Program at vaccine@cityofchicago.org or 312-746-9330 with any additional questions.

2. How should patients be screened for hepatitis A risk factors?

CDPH recommends universal screening of ED patients in Chicago to identify and vaccinate high-risk patients during their ED visit. If the patient's history includes any of the following risk factors and there are no signs or symptoms of acute hepatitis A infection then vaccination should be strongly encouraged:

- A. Persons who are homeless, transiently-housed, or unstably-housed.
- B. Persons who use injection and non-injection illicit drugs.

Each site will need to determine how best to integrate universal screening into patient assessment and staff/provider work flow. One consideration that worked well in San Diego County is the use of standing orders that allow triage nurses to screen and vaccinate individuals while waiting to be seen by the ED provider. Other hospitals have opted for ED provider-based screening and vaccination integrated into patient assessment. CDPH is available for consultation on these processes as needed. The above risk factors may change depending on the epidemiology on hepatitis A cases in Chicago. CDPH will contact you as updated guidance becomes available.

CDPH has adapted an infographic from Dr. Kristi L. Koenig, County of San Diego Health & Human Services Agency EMS Medical Director and the Michigan Department of Health and Human Services (MDHHS) to assist with hepatitis A risk assessment and screening titled: ***Evaluation and Management of Patients at High Risk for Hepatitis A***. This infographic will also be available on the outbreak website www.cityofchicago.org/HepatitisA.

3. Who is eligible to receive public hepatitis A vaccine at this time?

Use of the public vaccine is reserved for eligible patients – those who are 19 years and older and are uninsured or underinsured. All patients in high-risk category A should receive public vaccine as they are not currently covered by ACIP recommendations for hepatitis A vaccine, but recommended by CDPH to be vaccinated at this time given local hepatitis A epidemiology. Patients in high-risk category B with Medicaid or private health insurance that covers vaccination are not eligible for public vaccine; they should be vaccinated with the ED's private vaccine stock.

Please note, if the insurance status of a high-risk patient is undetermined, CDPH recommends using public vaccine to ensure that high-risk patients are vaccinated.

4. How do we enroll our ED in I-CARE (Illinois Comprehensive Automated Immunization Registry Exchange) and is it required?

We recommend assigning ED staff members (1 per shift) to look up and/or enter vaccination information into I-CARE. Someone in your organization is enrolled in the Chicago Vaccines for Children (VFC) Program which has required I-CARE entry for vaccines. Contact ChicagoVFC@cityofchicago.org to expedite I-CARE accounts for selected staff members or inquire about whom in your organization has access already. If I-CARE entry is not immediately possible, consider creating another system to record patient vaccination information in your electronic medical record (EMR) to avoid duplicate vaccine doses and protect vaccine supply. Do not wait for I-CARE access to start administering hepatitis A vaccine.

5. What is the status of public hepatitis A vaccine availability to ED sites?

Currently, there are national vaccine supply constraints and CDPH is working with CDC to prioritize high-risk individuals for vaccination. Vaccine will be made available to ED sites based on estimates of eligible, high-risk patients currently seen at that site. Additional vaccine can be requested at vaccine@cityofchicago.org. ED sites are encouraged to report all public vaccine doses in I-CARE.

6. What is the status of private hepatitis A vaccine availability to ED sites?

ED sites should have the capacity to order private hepatitis A vaccine directly from GlaxoSmithKline (GSK) and Merck. GSK may limit the quantity of supply ordered to 400 doses per order, but will not limit the number of times ED sites order. Merck may not have the desired presentation, but should have ample supply of vaccine. CDPH recommends hospitals contact the manufacturer directly via website or calling to place orders. Vaccine allocations are being managed by the manufacturers and distributors may not have an inventory.

- GSK: 1-888-825-5249

<https://gsksource.com/pharma/content/gsk/source/us/en/global/corporate/resources/vaccines.html>

- Merck: 1-800-672-6372

<https://www.merckvaccines.com/Products/Vaqta/Pages/home>

For “worried well” patients who are concerned about their risk of getting hepatitis A yet have no known exposure or risk factors, referral to their healthcare provider for discussion is appropriate. When vaccine supply improves, revised guidance will be provided regarding vaccination of low risk patients. Education about risk factors, monitoring for signs and symptoms of hepatitis A, and vaccine availability is beneficial for low risk patients.

Again, if you accept public vaccine from CDPH, universal screening of patients within the ED should be implemented immediately and vaccination provided to high-risk patients. CDPH is recommending that high-risk patients are vaccinated in the ED and NOT referred elsewhere for vaccination.