

**M E M O R A N D U M**

September 22, 2009

TO: Health and Human Services and Education Committees

FROM: Linda McMillan, Senior Legislative Analyst 

SUBJECT: **Update: Flu Vaccine for School-Aged Children (School-Based Vaccinations)**

*Expected for this session:*

Carol Jordan, Senior Administrator for Communicable Diseases and Epidemiology  
Judith Covich, Director, School Health Services, DHHS  
Stephen Bedford, MCPS Chief School Performance Officer

At this session, the joint Committee will be provided with an update on the school-based vaccination program for **seasonal** flu that will have begun on September 23<sup>rd</sup>. The briefing materials provide an overview of the effort and the responsibilities of those involved. As noted on © 3, the goal of the effort is to vaccinate 32,000 elementary and pre-k students (including those in Head Start) for the seasonal flu. The vast majority of vaccinations will be provide by flu mist rather than an inoculation. Information has been sent home in backpacks and included in newsletters and on the MCPS website.

The joint Committee will also receive information for possible scenarios for a school-based H1N1 Flu vaccination effort. The H1N1 vaccine is expected to be available at the end of October. The number of children who can be vaccinated will be impacted by whether one dose or two doses of vaccine are necessary. Attached at © 25-28 is recent information on early results that indicate only one dose of vaccine will likely be needed for children ages 10 to 17 but that, as with seasonal flu vaccine, two doses may be needed for younger children.

<u>Attached</u>	<u>Circle</u>
Presentation materials from School Health	1-18
Information provided on MCPS website and sent home to MCPS students (letter from Health Officer © 19 and consent form © 22)	19-24
“Little kids need 2 shots for swine flu”, Baltimore Sun, September 22, 2009	25-26
Early Results: In Children, 2009 H1N1 Influenza Vaccine Works Like Seasonal Flu Vaccine, National Institutes of Health NIH News, September 21, 2009	27-28

# School Based Flu Vaccine Administration

**Department of Health and Human Services  
Public Health Services**

**Report to County Council HHS-Ed Committees**

## Parameters for Exclusion for Flu Like Symptoms

- Temperature > 100.0 degrees AND cough and/or sore throat
- Exclude ill students for at least 24 hours fever-free without the use of fever-reducing medicines
- This guidance applies to all people who have the flu or FLS, even if they are taking antiviral drugs
- More stringent guidelines and longer periods of exclusion may be considered for high-risk students, such as children younger than 5 years old, pregnant teens and those with chronic illnesses

# Goals for School Based *Seasonal* Flu Vaccine Administration

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- Vaccinate 32,000 students(50% of enrollment) in 131 elementary schools including Pre K-Head Start
- Primary vaccine: Flu Mist
- Second dose Flu Mist for 10-30% of students
- 10% IM Vaccine
- Complete Dose #1 in 4 weeks
- Vaccine administered in 10-14 schools/day

# Seasonal Vaccination Administration Assumptions

- Start date for Dose #1: 9.23.09
- Dose #2 for students under 9 yrs who have not had previous flu vaccine, 28 days after Dose #, mini clinic
- IM vaccine administered at later date; not at clinic
- SHS provides 2 SCHN and 1 SHRA/clinic for each session
- Additional support provided by other DHHS nurses, Volunteer Corps, MCPS staff, parent and community volunteers
- Vaccine staff and support projections are based on school size
- Flu Mist can be administered @ 1 minute per child

## Proposed Timeline for Seasonal School Based Flu Vaccine Administration

- Notification of School Based Flu Plan to all schools
  - **Websites-MCPS/County**
  - **Parent Letter**
  - **Consent form for Seasonal Flu Vaccine** 9/01/09
- Notification of vaccination date sent from each school 9/09-10/09
  - Connect Ed
- Start seasonal flu vaccination Dose #1 9/23/09
- Start seasonal flu vaccine Dose #2 10/24/09
- H1N1 notice TBD

# Notification and Consent Forms to School Community

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- County and School Websites
- Backpacks
- Connect Ed message
- Principal newsletter
- PTA newsletter

# Consent Form Process

- MCPS
  - Available on MCPS and county websites
  - Distribute via backpacks
  - Consent forms returned to teachers -->health room staff
- SHS
  - Screen consent forms for vaccine eligibility
  - Prepare forms for clinic
  - Document vaccine administration
  - File completed Forms in student's health folder



# Roles and Responsibilities

## School Nurse

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- **Role->Coordinates Preparation**
- Coordinates with Principal or designee clinic re space and recruitment of parent volunteers
- Reviews all consent forms
- Determine if student gets flu mist or IM
- Requests class lists
- On day of vaccine clinic, reviews with team their roles and responsibilities
- Completes clinic reports
- Plans for 2nd dose vaccinations and injectables

## **Roles and Responsibilities**

- School Nurse or other authorized health professional
- **Role-> Vaccinator**
  - Confirm student identification
  - Reviews consent form prior to administration
  - Observes student for signs of illness
  - Administers Flu Mist
  - Documents Administration on Consent Form

# Roles and Responsibilities

## School Health Room Aide

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- **Role->Intake**
- Before vaccination date, organizes consent forms by class/teacher
- On vaccination day, checks Student Identification and matches Consent form
- Directs Logistic Assistants in moving students to vaccinators

## **Roles and Responsibilities Parent, school, community volunteers**

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- **Role->Logistic Assistants**
- Assists in classroom to line up students
- Escorts Students to Clinic Area
- Assists in Waiting Area
- Escorts Student to Vaccinators
- Escorts Student back to classroom

# Roles and Responsibilities

## MCPS

- Translation of consent forms and parent letters
- Post flu campaign information on MCPS Website
- Local school assistance—principal
  - Identify space—media center, all purpose room
  - Identify school contact to assist nurse with logistics and recruiting parent volunteers
- With nurse share School Based Vaccination Plan with staff
- Copy and distribute parent letters and consent forms via back-pack
- Notify parents of school's vaccination day(s)

# Roles and Responsibilities

## MCPS

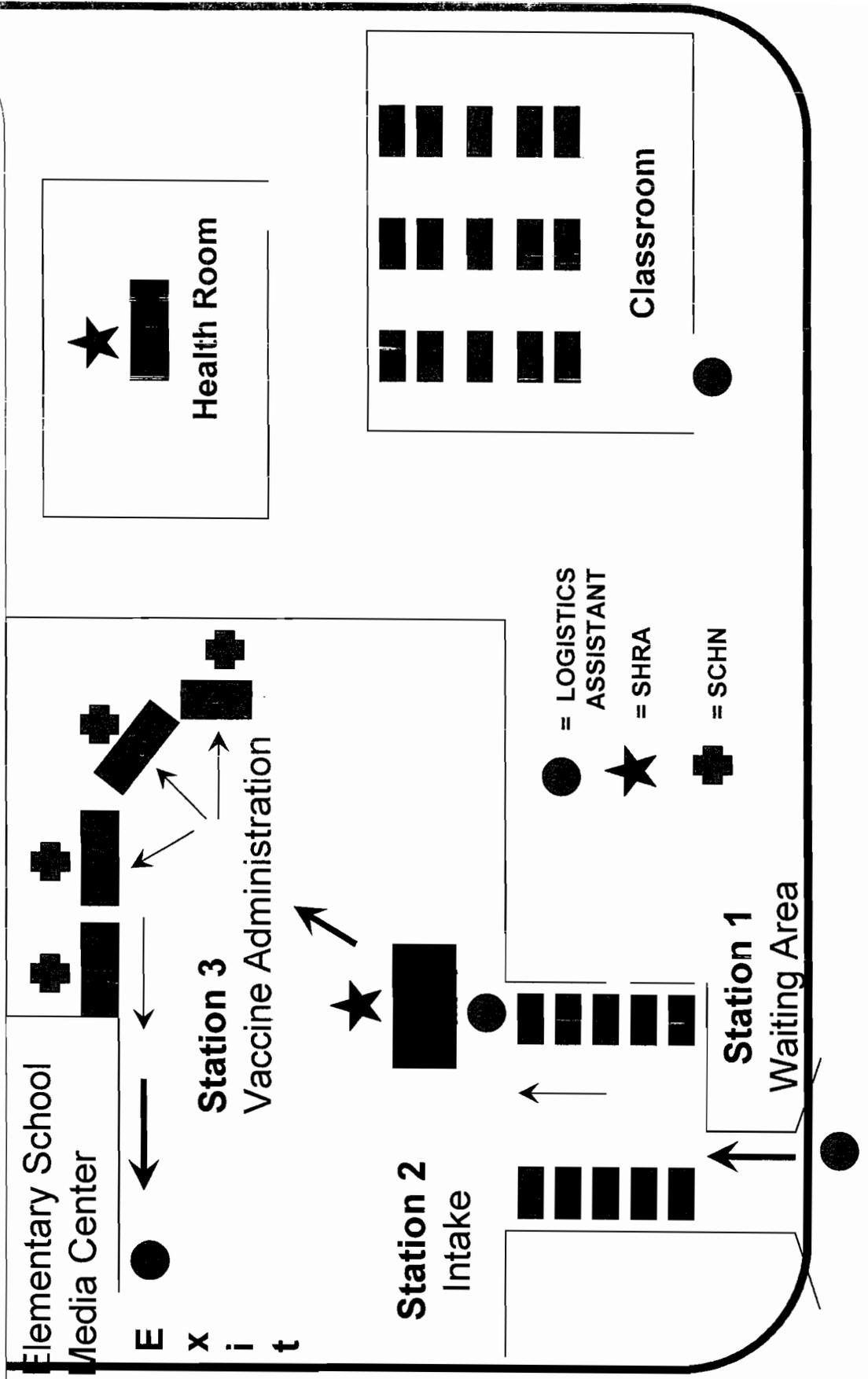
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- **Teacher**
  - Collect returned consent forms from students in class & forward to health room staff
  - On day of vaccination, teachers will receive a list of students to be vaccinated and name tags for each. A logistics assistance will come to class and escort the students to and from the vaccination area.

# DIAGRAM OF ADMINISTRATION PLAN

## PLAN

School Size 450 – 600 students



# Sample Clinic Flow

- School with 450-600 students

- 4 vaccine stations

- 5-6 Logistic Assistants

- 1 SHRA

- 1 sub SHRA or volunteer for Health Room coverage

- Home SCHN will administer traditional flu shots at a later time

Time	Pick up	Arriving	In line	Vaccine	Returning
925	Ka				
930	Kb	Ka			
935	Kc	Kb	Ka		
940	Kd	Kc	Kb	Ka	
945	1a	Kd	Kc	Kb	Ka
950	1b	1a	Kd	Kc	Kb
955	1c	1b	1a	Kd	Kc
1000	1d	1c	1b	1a	Kd
1005	2a	1d	1c	1b	1a
1010	2b	2a	1d	1c	1b
1015	2c	2b	2a	1d	1c
1020	2d	2c	2b	2a	1d
1025	3a	2d	2c	2b	2a
1030	3b	3a	2d	2c	2b
1035	3c	3b	3a	2d	2c
1040	3d	3c	3b	3a	2d
1045	4a	3d	3c	3b	3a
1050	4b	4a	3d	3c	3b
1055	4c	4b	4a	3d	3c
1100	4d	4c	4b	4a	3d
1105	5a	4d	4c	4b	4a
1110	5b	5a	4d	4c	4b
1115	5c	5b	5a	4d	4c
11120	5d	5c	5b	5a	4d
1125		5d	5c	5b	5a
1130			5d	5c	5b
1135				5d	5c
1140					5d

# Scenarios for School Based H1N1 Vaccine Administration

## Scenarios for H1N1

H1N1 vaccine is available at end of October, 2009, supply is limited

Begin with children: 6 mo to 4 years

- PreK- Headstart students
- Pregnant Teens
- Students with underlying health conditions ( cardiac, neuro-cognitive, asthma, diabetes, immunocompromised

# Scenarios for School Based H1N1Vaccine Administration

## Scenarios for H1N1

**When enough vaccine is available open to Target Groups recommended by CDC**

- **All students-public and private (age 5-24)**
- **Clinics at high schools outside of school hours**
- **Also community locations**



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Isiah Leggett  
County Executive

Uma S. Ahluwalia  
Director

Dear Parent/Guardian:

Montgomery County Department of Health and Human Services will offer free *seasonal flu vaccinations* in all MCPS elementary schools beginning September 23, 2009, through October 23, 2009. *Seasonal flu vaccine* is not the vaccine for *H1N1 (swine flu)*. Information about the *H1N1 (swine flu) vaccine* will be available later in the fall.

*FluMist (nasal vaccine)* is the vaccine that most students will receive in school. It is a gentle spray that is administered in each nostril. It is well tolerated by children and has minimal side effects. Detailed information about *FluMist (nasal vaccine)* is in the "What You Need to Know" fact sheet (attachment) and can be found on the MCPS website.

Some students cannot receive *FluMist (nasal vaccine)*. The attached consent form indicates the conditions that do not allow *FluMist (nasal vaccine)* to be administered. If you answer "Yes" to any of the questions on the consent form, your child may not be eligible to receive *FluMist (nasal vaccine)*. The school nurse will contact you to obtain your consent to provide injectable flu vaccine if indicated.

Children under 9 years of age who have not received a previous flu vaccine (nasal or injectable) or received only one dose of flu vaccine in the past should have a second dose of *FluMist (nasal vaccine)* approximately four weeks after the first dose. Your school nurse will arrange for those students to receive the second dose of *FluMist (nasal vaccine)*.

If you want your child to be vaccinated for *seasonal flu*, read the enclosed information and return the signed consent form to your child's school with all questions answered by **September 11, 2009**.

School nurses and other registered and/or certified health professionals will administer the vaccine. **Parents will be notified by their principal and nurse of the specific date that vaccinations will be provided at their child's school.**

The Centers for Disease Control (CDC) encourages all children and adults to get the seasonal flu vaccine. Parents of middle and high school students should check with their private health care providers for further information. Dates and locations for community clinic sites will be posted on the MCPS website as soon as the information is available. Because children get and spread flu, vaccination of children helps protect family members and others in the community.

Please keep in mind these general precautions for preventing flu and staying healthy—cover coughs and sneezes; wash hands frequently; and avoid touching your eyes, nose, or mouth. It is important to stay at home when sick with flu-like symptoms (fever greater than 100 °F with a cough or sore throat). Children should be fever-free for 24 hours before returning to school. If you have questions, please contact your school nurse.

Sincerely,

Ulder J. Tillman, M.D., M.P.H.

UJT:kvr

Public Health Services

19

# LIVE, INTRANASAL INFLUENZA VACCINE

## WHAT YOU NEED TO KNOW 2009-10

Many Vaccine Information Statements are available in Spanish and other languages. See [www.immunize.org/vis](http://www.immunize.org/vis).

### 1 Why get vaccinated?

Influenza (“flu”) is a contagious disease.

It is caused by the influenza virus, which can be spread by coughing, sneezing, or nasal secretions.

Other illnesses can have the same symptoms and are often mistaken for influenza. But only an illness caused by the influenza virus is really influenza.

Anyone can get influenza, but rates of infection are highest among children. For most people, it lasts only a few days.

It can cause:

- fever
- sore throat
- chills
- muscle aches
- cough
- headache
- fatigue

Some people, such as infants, elderly, and those with certain health conditions, can get much sicker. Flu can cause high fever and pneumonia, and make existing medical conditions worse. It can cause diarrhea and seizures in children. On average, 226,000 people are hospitalized every year because of influenza and 36,000 die – mostly elderly. **Influenza vaccine can prevent influenza.**

### 2 Live, attenuated influenza vaccine - LAIV (nasal spray)

There are two types of seasonal influenza vaccine:

1. **Live, attenuated** influenza vaccine (LAIV) contains live but attenuated (weakened) influenza virus. It is sprayed into the nostrils.

2. **Inactivated** influenza vaccine, sometimes called the “flu shot,” is given by injection. *Inactivated influenza vaccine is described in a separate Vaccine Information Statement.*

These “seasonal” influenza vaccines are formulated to prevent annual flu. They do not protect against pandemic H1N1 influenza.

Influenza viruses are always changing. Because of this, influenza vaccines are updated every year, and an annual vaccination is recommended.

Each year scientists try to match the viruses in the vaccine to those most likely to cause flu that year. When there is a close match the vaccine protects most people from serious influenza-related illness. But even when there is not a close match, the vaccine provides some protection. Influenza vaccine will *not* prevent “influenza-like” illnesses caused by other viruses.

It takes up to 2 weeks for protection to develop after the vaccination. Protection lasts up to a year.

LAIV does not contain thimerosal or other preservatives.

### 3 Who can get LAIV?

LAIV is approved for people from 2 through 49 years of age, who are not pregnant and do not have certain health conditions (see #4, below). Influenza vaccination is recommended for people who can spread influenza to others at high risk, such as:

- **Household contacts and out-of-home caregivers** of children up to 5 years of age, and people 50 and older.
- Physicians and nurses, and family members or anyone else in **close contact with people at risk** of serious influenza.

Health care providers may also recommend a yearly influenza vaccination for:

- People who provide **essential community services**.
- People living in **dormitories, correctional facilities**, or under other crowded conditions, to prevent outbreaks.

Influenza vaccine is also recommended for anyone who wants to **reduce the likelihood of becoming ill** with influenza or **spreading influenza to others**.

### 4 Some people should not get LAIV

LAIV is not licensed for everyone. The following people should get the **inactivated** vaccine (flu shot) instead:

- **Adults 50 years of age and older or children between 6 months and 2 years of age.** (Children younger than 6 months should not get either influenza vaccine.)
- Children younger than 5 with asthma or one or more episodes of wheezing within the past year.
- People who have long-term health problems with:
  - heart disease
  - kidney or liver disease
  - lung disease
  - metabolic disease, such as diabetes
  - asthma
  - anemia, and other blood disorders
- Anyone with certain muscle or nerve disorders (such as seizure disorders or cerebral palsy) that can lead to breathing or swallowing problems.
- Anyone with a weakened immune system.
- Children or adolescents on long-term aspirin treatment.
- Pregnant women.

Tell your doctor if you ever had Guillain-Barré syndrome (a severe paralytic illness also called GBS). You may be able to get the vaccine, but your doctor should help you make the decision.

The **flu shot** is preferred for people (including health-care workers, and family members) in close contact with anyone who has a *severely* weakened immune system (requiring care in a protected environment, such as a bone marrow transplant unit). People in close contact with those whose immune systems are less severely weakened (including those with HIV) may get LAIV.

Anyone with a nasal condition serious enough to make breathing difficult, such as a very stuffy nose, should get the flu shot instead.

Some people should talk with a doctor before getting either influenza vaccine:

- Anyone who has ever had a serious allergic reaction to eggs or another vaccine component, or to a previous dose of influenza vaccine. *Tell your doctor if you have any severe allergies.*
- People who are moderately or severely ill should usually wait until they recover before getting flu vaccine. If you are ill, talk to your doctor or nurse about whether to reschedule the vaccination. People with a mild illness can usually get the vaccine.

## 5 When should I get influenza vaccine?

You can get the vaccine as soon as it is available, usually in the fall, and for as long as illness is occurring in your community. Influenza can occur any time from November through May, but it most often peaks in January or February. Getting vaccinated in December, or even later, will still be beneficial in most years.

Most people need one dose of influenza vaccine each year.

**Children younger than 9 years of age getting influenza vaccine for the first time** – or who got influenza vaccine for the first time last season but got only one dose – should get 2 doses, at least 4 weeks apart, to be protected.

Influenza vaccine may be given at the same time as other vaccines.

## 6 What are the risks from LAIV?

A vaccine, like any medicine, could possibly cause serious problems, such as severe allergic reactions. The risk of a vaccine causing serious harm, or death, is extremely small.

Live influenza vaccine viruses rarely spread from person to person. Even if they do, they are not likely to cause illness.

LAIV is made from weakened virus and does not cause influenza. The vaccine can cause mild symptoms in people who get it (see below).

### Mild problems:

Some children and adolescents 2-17 years of age have reported mild reactions, including:

- runny nose, nasal congestion or cough
- fever
- headache and muscle aches
- wheezing
- abdominal pain or occasional vomiting or diarrhea

Some adults 18-49 years of age have reported:

- runny nose or nasal congestion
- sore throat
- cough, chills, tiredness/weakness
- headache

### Severe problems:

- Life-threatening allergic reactions from vaccines are very rare. If they do occur, it is usually within a few minutes to a few hours after the vaccination.
- If rare reactions occur with any product, they may not be identified until thousands, or millions, of people have used it. Millions of doses of LAIV have been distributed since it was licensed, and no serious problems have been identified. Like all vaccines, LAIV will continue to be monitored for unusual or severe problems.

## 7 What if there is a severe reaction?

### What should I look for?

Any unusual condition, such as a high fever or behavior changes. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

### What should I do?

- Call a doctor, or get the person to a doctor right away.
- Tell the doctor what happened, the date and time it happened, and when the vaccination was given.
- Ask your provider to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form. Or you can file this report through the VAERS website at [www.vaers.hhs.gov](http://www.vaers.hhs.gov), or by calling 1-800-822-7967.

*VAERS does not provide medical advice.*

## 8 The National Vaccine Injury Compensation Program

A federal program exists to help pay for the care of anyone who has a serious reaction to a vaccine.

For more information about the National Vaccine Injury Compensation Program, call **1-800-338-2382**, or visit their website at [www.hrsa.gov/vaccinecompensation](http://www.hrsa.gov/vaccinecompensation).

## 9 How can I learn more?

- Ask your provider. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
  - Call **1-800-232-4636 (1-800-CDC-INFO)** or
  - Visit CDC's website at [www.cdc.gov/flu](http://www.cdc.gov/flu)



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION



Vaccine Information Statement  
Live, Attenuated Influenza Vaccine (8/11/09) U.S.C. §300aa-26

21

Montgomery County Department of Health and Human Services  
School Health Services

Elementary School Based Vaccination Program

**Consent for Seasonal Nasal Spray Flu (FluMist) Vaccination(s)**

***This is not the H1N1 (Swine flu) vaccine.***

Dear Parent / Guardian;

Please complete this form if you want your child to receive seasonal nasal flu (Flu Mist) vaccine(s).

Sign and return this consent form to the Health Room by September 11, 2009.

Child's Last Name:	Child's First Name:	Age:	Grade:
Address:	Home Phone: Cell Phone: Work Phone:	Date of Birth:	
Teacher:	<b>Has your child ever had a flu vaccine before?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <b>Did they receive only one dose of flu vaccine the first time they had the flu vaccine?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		

**For maximum protection against influenza the Centers for Disease Control (CDC) recommends that children under 9 years old, who are getting seasonal influenza vaccine (FluMist) for the first time, receive a second dose in 4 weeks. CDC also recommends that children under the age of 9 who only received 1 dose in their first year of vaccination receive 2 doses in the following year.**

If you answer **YES to ANY** of the questions below, your child is **NOT** eligible to receive the nasal seasonal flu vaccine, however your child may receive the injectable seasonal flu vaccine. The school nurse will contact you.

If you answer **NO to ALL** of the questions and would like your child to receive the seasonal nasal flu vaccine, please sign below.

1. Does your child have any significant chronic or long-term illnesses involving the kidneys, heart, nervous system, brain, diabetes, lungs, (like cystic fibrosis), or blood system (like sickle cell anemia)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2. Does your child have asthma?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Does your child have a severe allergy to egg products, Gentamycin, gelatin, arginine or to a previous flu vaccine?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4. Is your child taking medicine containing aspirin?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5. Does your child have a history of Guillian-Barre syndrome?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6. Is your child scheduled to receive any vaccines in the month following this nasal spray vaccination?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7. Has your child received any vaccines in the past month?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
8. Does your child live with someone who is undergoing a stem cell transplant or bone marrow transplant?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

**FluMist can not be administered to any child who is ill on the day of the vaccination clinic.**

Statement of Consent:

I have received and read the Vaccine Information Statement (VIS) about the seasonal nasal flu vaccine. I have had a chance to ask questions about the vaccine. I understand that this vaccine is approved for healthy children and have reviewed the reasons some children should not get the seasonal nasal flu vaccine. None of these reasons apply to my child. I agree to have my child vaccinated with the seasonal nasal flu vaccine. If medically necessary I want my child to have a second dose of the seasonal nasal flu vaccine. If you have any questions, please contact your School Nurse.

Name of parent / guardian: \_\_\_\_\_ Signature of parent / guardian: \_\_\_\_\_ Date: \_\_\_\_\_  
\* \* \* \* \* Office Use Only \* \* \* \* \*

Vaccine	Mfgr/ Lot #	Exp. date	Dose/ Route	Site given	VIS Date
1 <sup>st</sup> dose <b>Influenza</b> (Intranasally)	MedImmune		0.2 ml intranasally	N/A	8/11/09
2 <sup>nd</sup> dose <b>Influenza</b> (Intranasally)	MedImmune		0.2 ml intranasally	N/A	8/11/09

<b>2<sup>nd</sup> Dose Required:</b> if less than 9 years old <b>and NO</b> previous flu vaccine (must have had <b>2</b> vaccines in one season)	Yes	No
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1<sup>st</sup> Vaccine administered by: \_\_\_\_\_ Date: \_\_\_\_\_ 2<sup>nd</sup> Vaccine administered by: \_\_\_\_\_ Date: \_\_\_\_\_

School Nurse Signature: \_\_\_\_\_

School: \_\_\_\_\_

22



# MONTGOMERY COUNTY PUBLIC SCHOOLS

ENGLISH

## INFORMATION ABOUT THE H1N1 FLU

Public health officials are concerned that, in the fall, the H1N1 flu virus might cause more serious illness than it did this spring. All schools are developing plans in case they have to close for some period of time and, if they do, for ways to continue teaching and learning. Principals and school system staff will use a variety of methods to communicate information about any changes in school operations. These include Connect-ED, the MCPS website and school websites, letters, and listserves. To be sure that you receive these messages, it is very important that you provide your child's school with your most up-to-date contact information, including telephone number(s) and email address, and let the school know right away if any of that information changes. In addition, you also can receive important school system messages by signing up for the MCPS QuickNotes e-mail service and Twitter messaging service through the MCPS website at [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org).

SPANISH

## INFORMACIÓN ACERCA DE LA GRIPE H1N1

Los funcionarios de salud pública están preocupados con la posibilidad de que, en el otoño, el virus de la gripe H1N1 pueda causar enfermedades de más gravedad que las causadas esta pasada primavera. Todas las escuelas están desarrollando planes en caso de tener que cerrar por un cierto período de tiempo, y de ser así, en qué forma se puede continuar la enseñanza y el aprendizaje. Los directores de las escuelas y el personal del sistema escolar utilizarán diversos métodos para comunicar información acerca de cualquier cambio que hubiese en las operaciones de las escuelas. Estos métodos incluyen Connect-ED, el sitio de Internet de MCPS y las páginas de Internet de las escuelas, cartas y comunicación a través de listas de servidores. **Para garantizar recibir estos mensajes, es de suma importancia que usted provea a la escuela de su hijo/a información de contacto actualizada, incluyendo número/s de teléfono y dirección de correo electrónico, y que deje saber a la escuela de inmediato cualquier cambio en esa información.** Además, usted puede recibir mensajes importantes del sistema escolar suscribiéndose para recibir QuickNotes, un servicio de información electrónica de MCPS, y usando el servicio de mensajes Twitter a través del sitio de Internet de MCPS, ingresando a [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org).

FRENCH

## INFORMATIONS CONCERNANT LA GRIPE H1N1

Les autorités sanitaires craignent qu'en automne, le virus de la grippe H1N1 puisse causer une maladie plus grave qu'elle ne l'a fait ce printemps. Toutes les écoles sont en train d'élaborer des plans au cas où elles auraient à fermer durant une certaine période de temps et, si elles le font, pour les façons de continuer à enseigner et apprendre. Les directeurs et le personnel du système scolaire utiliseront une variété de méthodes pour communiquer les informations sur n'importe quels changements dans les opérations scolaires. Celles-ci incluent Connect-ED, le site Internet de MCPS et les sites Internet scolaires, les lettres, et listeserves. **Pour être sûr de recevoir ces messages, il est très important que vous fournissiez à l'école de votre enfant vos informations de contact les plus récentes, y compris le(s) numéro(s) de téléphone et l'adresse électronique, et informiez l'école immédiatement concernant n'importe quel changement dans vos informations.** En plus, vous pouvez aussi recevoir des messages importants du système scolaire en vous inscrivant au service e-mail de MCPS QuickNotes, et au service de messagerie Twitter par le site Internet de MCPS à [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org).



# MONTGOMERY COUNTY PUBLIC SCHOOLS

CHINESE

## 有關 H1N1 流感的資訊

公共衛生官員擔心，H1N1 流感病毒在秋季可能會引發比今年更嚴重的疫情。所有學校正在制訂計畫，以因應可能出現需要短時間停課的情況，以及如何在停課期間繼續進行教學。校長和學校系統工作人員將利用各種方式公佈學校運作上的變更事宜。這些方式包括 Connect-ED、MCPS 網站和各種學校網站、信函和 listserves (電子郵件郵寄名單)。為了確保您能收到這些消息，您必須向孩子的學校提供您最新的聯絡資料(包括電話號碼和電子郵件地址)，並且在資料有變時立即通知學校。此外，您還可以在 MCPS 的網站 [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org) 上登記使用 MCPS QuickNotes 電子郵件服務和 Twitter 短訊服務，用來接收學校系統發送的重要消息。

KOREAN

## H1N1 FLU (돼지 독감)에 관한 정보

공중 보건 담당자들은 돼지 독감 바이러스가 다가오는 가을에는 지난 봄보다도 더욱 심각한 질병을 일으킬 수도 있음을 염려하고 있습니다. 모든 학교는 일정 기간 동안 휴교를 해야 할 경우 그리고 그런 경우에라도 교수와 학습이 지속적으로 이루어 지도록 하기 위한 방안을 마련하고 있습니다. 학교장을 비롯한 교직원들은 학교 운영 상의 모든 변화에 관한 정보를 알리기 위하여 다양한 방법을 이용할 것입니다. 방법은 Connect-ED, MCPS 웹 사이트, 개별 학교 웹 사이트, 편지, 그리고 메일링 리스트 등을 포함합니다. 이러한 소식을 확실하게 듣기 위하여, 전화 번호와 이메일 주소를 포함한 가장 최근의 연락 정보를 자녀의 학교에 제공하시는 것은 매우 중요하며 연락 정보가 바뀔 경우에는 학교에 즉시 알려 주셔야 합니다. 또한, 여러분은 학교 시스템으로부터의 최근 소식을 듣는 방법으로는 MCPS 웹 사이트 [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org) 를 통하여 MCPS QuickNotes 이메일 서비스와 Twitter 메세지 서비스에 등록하는 것입니다.

VIETNAMESE

## THÔNG TIN VỀ BỆNH CÚM H1N1

Các quan chức y tế lo ngại rằng, trong mùa thu, vi khuẩn cúm H1N1 có thể sẽ gây bệnh nghiêm trọng hơn trong mùa xuân này. Tất cả các trường học đang soạn thảo các kế hoạch đề phòng khi phải đóng cửa trường trong một khoảng thời gian nào đó và, nếu trường hợp này xảy ra, các phương cách để tiếp tục việc dạy và học. Các vi hiệu trường và nhân viên của hệ thống trường học sẽ dùng một số phương pháp khác nhau để thông báo tin tức về bất cứ thay đổi nào trong sự vận hành của nhà trường. Các phương pháp đó bao gồm Connect-ED, trang mạng MCPS và các trang mạng của các trường, thư từ, và danh sách điện thư. Để chắc chắn là quý vị sẽ nhận được những tin báo đó, điều tối quan trọng là quý vị hãy cung cấp cho trường học của con quý vị những thông tin để liên lạc mới nhất, bao gồm cả số điện thoại và địa chỉ điện thư, và báo cho nhà trường biết ngay khi có một thông tin nào trong đó thay đổi. Ngoài ra, quý vị còn có thể nhận được những tin báo quan trọng từ hệ thống trường học bằng cách ghi tên với dịch vụ điện thư QuickNotes MCPS và dịch vụ nhắn tin (messaging) Twitter thông qua trang mạng MCPS tại [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org).

AMHARIC

## ስለ H1N1 (ኤች 1 ኤን 1)

### ኢንፉሌንዛ መረጃ

የሕዝብ ጤና ቢሮዎች የH1N1 ኢንፉሌንዛ ቫይረስ በጸደይ ወራት ካደረሰው ጉዳት በላይ ምናልባት በከረምቱ መሸጋገርያ በመክር ወራት እጅግ ከፍ ያለ ህመም ሊያስከትል ይችላል የሚል ስጋት አላቸው። ሁሉም ት/ቤቶች ምናልባት ለተወሰነ ጊዜ ስለሚዘገቡት እና ከተዘገቡ የማስተማሩ ሂደት እና ትምህርት እንዴት እንደሚቀጥል ፕላን እያረፉት ለትምህርት አሰጣጥ ላይ ማንኛውም ዓይነት ለውጥ ሲኖር ዳይሬክተሮች እና የትምህርት ቤት አመራር አባላት የተለያዩ ዘዴዎችን በመጠቀም የመረጃ ልውውጥ ለማድረግ ይዘጋጃሉ። ይኸውም፣ Connect-ED፣ የMCPS ድረ-ገጽ እና የትምህርት ቤት ድረ-ገጾች፣ ደብዳቤዎች እና አጠር ያሉ ዝርዝር ማስታወሻዎች ያገለግላሉ። እነዚህን መልዕክቶች ለማግኘትም አርግጠኛ ለመሆን፣ ለልጅዎ ት/ቤት በአሁኑ ሰዓት የሚገለገሉትን አድራሻ፣ ስልክ ቁጥር እና የ ኢ-ሜል አድራሻ መስጠት በጣም ጠቃሚ ነው። የአድራሻ ለውጥ ሲኖርዎት ወደያውት ት/ቤት እንዲያውቅ ያድርጉ። በተጨማሪም፣ የት/ቤትን አመራር ጠቃሚ መረጃዎች ማግኘት ይችሉ ዘንድ ለMCPS QuickNotes የኢ-ሜል አገልግሎት እና በMCPS የድረ-ገጽ [www.montgomeryschoolsmd.org](http://www.montgomeryschoolsmd.org) አማካኝነት የTwitter መልዕክት አገልግሎት መመዝገብ ይችላሉ።

24

[www.baltimoresun.com/health/bal-md.vaccine22sep22,0,3954003.story](http://www.baltimoresun.com/health/bal-md.vaccine22sep22,0,3954003.story)

## baltimoresun.com

### Little kids to need 2 shots for swine flu

#### But teens will gain immunity from one shot

By Kelly Brewington | [kelly.brewington@baltsun.com](mailto:kelly.brewington@baltsun.com)

September 22, 2009

The swine flu vaccine works in just one dose for older children, but kids younger than 10 will likely need two shots, according to early results of clinical trials, federal health officials said Monday.

The findings mean that younger children could need as many as four shots this fall, to protect against both the seasonal flu and the swine flu.

In the clinical trials, the swine flu vaccine produced a strong immune response in children 10 to 17 years old in just 10 days; younger children generally had a weaker reaction over the same time period. They will likely need two shots given 21 days apart, officials said.



The results in children come from data gleaned at National Institutes of Health-sponsored trials of a vaccine made by French manufacturer Sanofi Pasteur. The trials are being conducted at the University of Maryland's Center for Vaccine Development and a handful of other sites. The studies tested two doses of the vaccine (15 micrograms and 30 micrograms) on 600 healthy children in three age groups: 10 to 17 years old, 3 to 9 years old, and 6 months to 36 months.

In the oldest group, 76 percent had a strong immune response to one 15-microgram dose. But for kids 3 to 9 years old, that figure was 36 percent. Of the youngest volunteers, just 25 percent produced a strong response.

The findings are something of a surprise to infectious disease experts who initially assumed that children of all ages would need two doses of the vaccine, since their immune systems are less mature than those of adults. In fact, up until data two weeks ago showed one dose was strong enough for adults, many experts assumed everyone would need two doses. The H1N1 virus is so different from typically circulating flu strains that most of the population has no immunity to it.

But so far, the immune response to the H1N1 inoculation is "acting strikingly similar" to seasonal flu shots in both adults and children, said Dr. Anthony S. Fauci, director of the National Institute of Allergy and Infectious Diseases.

"Overall, this is very good news for the vaccination program, both for supply of the vaccine and potential efficacy," he said.

Typically, children 9 and under who have never received a seasonal flu shot before must receive two shots to trigger enough immunity to fight off the virus.

But how those shots should be given isn't entirely clear. Federal health officials said Monday that children can receive both the seasonal flu shot and the swine flu inoculation on the same day. But if they receive the Flu Mist, which is inhaled and contains a live form of the virus, then getting both types of vaccine on the same day won't "take," according to Anne Schuchat, the director of the National Center for Immunization & Respiratory Diseases at the Centers for Disease Control and Prevention.

Another NIH trial designed to look at the timing of when to give the two flu vaccines is not expected to produce results until sometime in November.

Officials are urging parents to have their children vaccinated now for the seasonal flu - that vaccine became available last month - and to immunize them against the H1N1 virus once the swine flu vaccine arrives, likely in the beginning of October.

"Seasonal flu vaccine is available and those who fall under recommendations should get that now and not worry about subsequent data that we are trying to collect," Fauci said.

Dr. Felix L. Kaufman, a pediatrician in Towson, said parents of babies are accustomed to a rigorous vaccination schedule and tend to view the flu shots as just one more added to the mix. "They aren't really looking at it in terms of four more shots," he said.

In fact, parents have been anxious to get their children vaccinated against the H1N1 virus and are often peppering him with questions on when the vaccine will be ready, he said. Kaufman asked the state health department for 2,000 doses for his large practice of about 9,000. He was told that his office could receive 400 doses by sometime in October and more would be available later.

"The swine flu has taken a lot more importance because of the media attention," he said. "Parents perceive that as a separate issue and they are asking a lot of specific questions."

Last week, the Food and Drug Administration approved four vaccines against the pandemic that has killed more than 593 people nationwide - at least 46 of them children - and sickened more than a million since outbreaks began in the spring. Experts have estimated that as many as half of Americans could come down with swine flu; up to 90,000 could die.

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26



National Institute of Allergy and  
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## **Early Results: In Children, 2009 H1N1 Influenza Vaccine Works Like Seasonal Flu Vaccine**

Early results from a trial testing a 2009 H1N1 influenza vaccine in children look promising, according to the trial sponsor, the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health. Preliminary analysis of blood samples from a small group of trial participants shows that a single 15-microgram dose of a non-adjuvanted 2009 H1N1 influenza vaccine — the same dose that is in the seasonal flu vaccine — generates an immune response that is expected to be protective against 2009 H1N1 influenza virus in the majority of 10- to 17- year-olds eight to 10 days following vaccination. These results are similar to those recently reported in clinical trials of healthy adults. Younger children generally had a less robust early response to the vaccine.

"This is very encouraging news," says NIAID Director Anthony S. Fauci, M.D. "As we had hoped, responses to the 2009 H1N1 influenza vaccine are very similar to what we see with routinely used seasonal influenza vaccines made in the same way. It seems likely that the H1N1 flu vaccine will require just one 15-microgram dose for children 10 to 17 years of age. The 2009 H1N1 influenza virus is causing widespread infections among children, so these are welcome results."

The ongoing NIAID-sponsored trial began in mid-August at five sites nationwide. The trial is assessing the safety and immune responses to one and two doses of either 15 micrograms or 30 micrograms of vaccine. Data from the trial is being compared for three age groups: children 6 months to 35 months old; 3 to 9 years old; and 10 to 17 years old.

The preliminary results are based on blood samples taken eight to 10 days after the first vaccination. Immune responses were strongest among the oldest children, those 10 to 17 years old. In this group of 25 children, a strong immune response was seen in 76 percent who received one 15-microgram dose of vaccine. The immune responses in children nine years old and younger were not as strong. Among 25 volunteers aged 3 to 9 years old, a strong immune response was seen in 36 percent of those given 15 micrograms of vaccine. In the youngest group, 20 children between 6 months to 35 months old, a single 15-microgram dose of vaccine produced a strong immune response in 25 percent of recipients.

"These results are not unexpected and are both similar to what is seen with seasonal influenza vaccines and consistent with what we and our colleagues at the Food and Drug Administration anticipated," notes Dr. Fauci.

Study investigators are also collecting blood samples from the volunteers approximately three weeks after both the first and second injections. It is anticipated that the immune response to the 2009 H1N1 influenza vaccine will be similar to that of seasonal influenza vaccination and will continue to rise for several weeks following vaccination, says Dr. Fauci. The study is being closely monitored by the trial physicians and staff as well as by an independent safety monitoring committee.



The vaccine being tested in this trial is manufactured by Sanofi Pasteur in Swiftwater, Pa., in the same manner as its licensed seasonal vaccine, which is used every year in millions of children, and is the same formulation recently licensed by the FDA to protect against 2009 H1N1 influenza. Like inactivated seasonal influenza vaccines, the vaccine contains a purified part of a killed virus and cannot cause flu.

NIAID is conducting trials of 2009 H1N1 influenza vaccines through its longstanding vaccine clinical trials network, the Vaccine and Treatment Evaluation Units. Additional information about the NIAID-sponsored clinical trials in children is available in an Aug. 18 Bulletin:

<http://www3.niaid.nih.gov/news/newsreleases/2009/H1N1pedvax.htm> and a Q&A:

<http://www3.niaid.nih.gov/news/QA/qaH1N1pedvax.htm>. A detailed description of the trial protocol is at [clinicaltrials.gov](http://clinicaltrials.gov): <http://clinicaltrials.gov/show/NCT00944073>.

For more information on influenza, including pandemic influenza and avian influenza, visit [www.flu.gov](http://www.flu.gov). Also, see NIAID's Web portal at <http://www3.niaid.nih.gov/topics/Flu/>.

NIAID conducts and supports research — at NIH, throughout the United States, and worldwide — to study the causes of infectious and immune-mediated diseases, and to develop better means of preventing, diagnosing and treating these illnesses. News releases, fact sheets and other NIAID-related materials are available on the NIAID Web site at <http://www.niaid.nih.gov>.

The National Institutes of Health (NIH) — *The Nation's Medical Research Agency* — includes 27 Institutes and Centers and is a component of the U.S. Department of Health and Human Services. It is the primary federal agency for conducting and supporting basic, clinical and translational medical research, and it investigates the causes, treatments, and cures for both common and rare diseases. For more information about NIH and its programs, visit [www.nih.gov](http://www.nih.gov).



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