

# Jab & Gab

The newsletter of the  
Wyoming Department of Health Immunization Unit

November 2023

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## We'd like to hear from you!

Are you hosting a community event, a health fair or community baby shower? Let us know! Reach out to School and Community Partnership Coordinator Tiffany Thomason at [tiffany.thomason@wyo.gov](mailto:tiffany.thomason@wyo.gov)



## Welcome Sahil Verma

*Kelly Douglas, Health Communication Specialist*

The Immunization Unit would like to welcome Public Health Advisor Sahil Verma to the team. In this position, Verma provides support through quality assurance projects, grant tracking, and grant project assistance.

“My passion is healthcare access and preventive medicine. Vaccination and immunization play a huge role and I’m an advocate for increasing vaccination rates,” Verma said.

“We are so happy to have Sahil Verma join us,” said Immunization Unit Manager Cassandra Walkama. “We will all benefit from his knowledge and experience, and from his enthusiasm for public health.”

Verma is a fourth generation doctor from India. His father was an ophthalmologist, his grandfather worked in internal medicine, and his great-grandfather was a surgeon in the Indian Army under British rule. Verma studied medicine and was a general practitioner in India for five years.

While he was a practicing doctor, Verma said, he was compelled to look at the greater needs of patients. What were the barriers to healthcare, and how could he help? How could he implement evidence-based improvements? These questions led him to immigrate to the United States, where he could learn about the healthcare system and help more people than just the patients he’d see in his clinic.

He immigrated to the United States in 2013, where he completed a master’s degree in public health with specialization in health policy. Verma is currently working towards a doctorate in public health.

He does not plan to be licensed to practice medicine in the United States for a while at least. “I think I can do more justice with my time if I’m in population health instead of individualized medicine,” Verma said.

In India, people with low income can access healthcare through a government insurance program similar to Medicaid. Verma said that everyone else in India must pay for healthcare as they need it, without using insurance, which is often

a barrier. Verma is interested in the mixed model insurance system that is practiced in the United States.

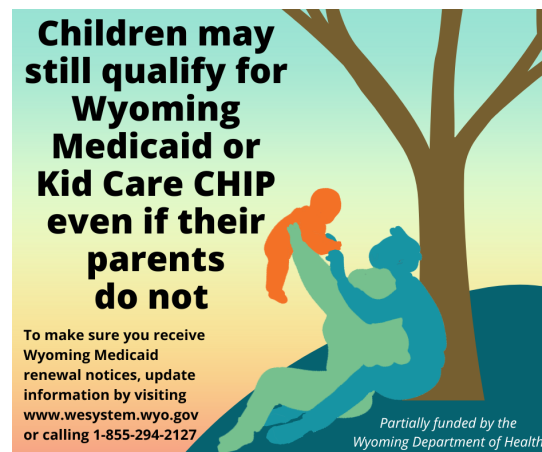
Verma sees many similarities between rural health needs in India and Wyoming. Challenges include distance, transportation, and cost. Religious or deeply held beliefs can also be a barrier to care.

“Wyoming is similar to where I come from,” Verma said. “It’s an agricultural community with a similar mindset in that people are so much involved in day-to-day work they don’t always take care of their own bodies.”

“I know people in India who would just take a cold bath and they think that’s the answer to anything. Some would go to homeopaths and holistic providers. A lot of people won’t go to allopathic (Western) medicine,” Verma said.

Before moving to Wyoming, Verma lived in New Jersey, where he worked for the Centers for Medicare and Medicaid Services (CMS). He worked as a federal health program specialist and assessed fraud and abuse within Medicaid services for CMS.

In his spare time, Verma plans to learn to ski and snowboard with his wife, Mamta, and son, Niam.



## Medicaid unwind

*From the Wyoming Department of Health*

Wyoming Medicaid’s process to review client eligibility is underway. Medicaid enrollees can update their contact information online at [www.wesystem.wyo.gov](http://www.wesystem.wyo.gov) or by calling 1-855-294-2127.

Renewals can be completed online at [www.wesystem.wyo.gov](http://www.wesystem.wyo.gov), over the phone with the Customer Service Center at 855-294-2127 or via a hard copy application. Hard copy applications can be downloaded at [health.wyo.gov/healthcarefin/apply/](http://health.wyo.gov/healthcarefin/apply/) and returned to the Customer Service Center via mail, email or fax.

If an enrollee's benefits close, the case can be reopened to the date of coverage loss if they still qualify and turn in a renewal form and any missing documentation within 90 days. For most cases, the only items needed are the completed renewal and income verification for the last 30

days.

**Children may remain eligible**, even if parents or others in the household are not. And those who no longer qualify for Medicaid can qualify for special enrollment in the [Health Insurance Marketplace](#).

More information about Wyoming Medicaid can be found [at this link](#).

## Wyoming Immunization Registry



*The Help Desk can be reached at:*

Phone:  
1-833-221-1451

Email:  
[wyr.helpdesk@wyo.gov](mailto:wyr.helpdesk@wyo.gov)

OR  
by utilizing the chat feature  
in the bottom left  
corner of the WyIR home  
page.

For questions about the  
Docket application, email  
[docket.helpdesk@wyo.gov](mailto:docket.helpdesk@wyo.gov)  
or call 307-777-7677.

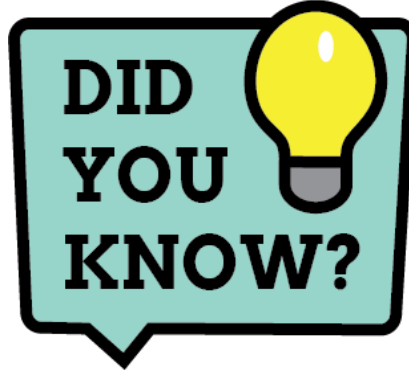
### WyIR Help Desk

The Wyoming Immunization Registry (WyIR) Help Desk is a tier one, or user level, service accessible to all WyIR users.

The Help Desk is the first point of contact for WyIR concerns including; user access, password resets, inventory concerns, reconciliation, reports, patient merges and deduplication, forecast, and more.

The Help Desk team is committed to responding to most issues within 48 business hours. Issues that cannot be resolved by the Help Desk are escalated to the Immunization Unit via a central email, which is monitored by Immunization Unit staff.

WyIR users are encouraged to contact the Help Desk first instead of reaching out to the Immunization Unit directly, or to individual Immunization Unit staff, who may be out of the office or unable to respond in a timely manner.



## WyIR enrollment

*John Taylor, Client Management Specialist*

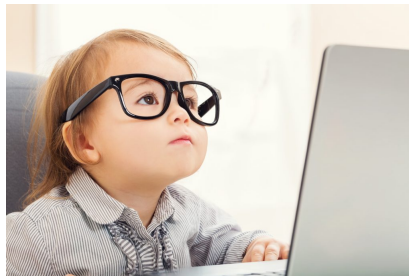
The Wyoming Immunization Registry (WyIR) enrollment process must be initiated when the following criteria are met:

- A new establishment needs to enroll into the WyIR for reporting, treatment, payment, or operations.
- A new facility in an already enrolled organization needs to enroll into the WyIR.
- Organization or facility demographic changes including:  
organization/facility name: organization/facility address: mergers and acquisitions; and a change to the enrolled organization's Responsible Authority.

This process can be initiated by completing the [Wyoming Immunization Registry \(WyIR\) Enrollment Form](#).

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## Training



## Clinical Vaccinology course November 15–17

The [National Foundation of Infectious Diseases \(NFID\) Clinical Vaccinology Course](#) will be held online November 15-17. This 3-day online course focuses on new developments and issues related to use of vaccines. Expert faculty provide the latest information on vaccines, including updated recommendations for vaccinations across the lifespan, and innovative and practical strategies for ensuring timely and appropriate vaccination. [Register for the online course](#) (\$700 fee).

[Continuing medical education \(CME\) and continuing nursing education \(CNE\)](#) credit will be offered.

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# New education modules on dispelling misinformation and communicating with autistic and neurodiverse people

*IZ Express Issue 1716, September 27, 2023*

The Vaccine Education Center at Children's Hospital of Philadelphia (CHOP) recently released [new education modules](#) to support adult and pediatric providers, immunization champions, caregivers and community members. These free online modules were developed and supported by the Vaccine Education Center and multiple city, state, and national partners. They offer training in the following topics: Trusted Messenger Engagement to Dispel Misinformation and Promote Vaccine Confidence for All Vaccines, and Vaccine Education and Autism: Supporting Provider and Community Needs.

To learn more about the modules, visit [chop.edu/vaccine-online-learning](https://chop.edu/vaccine-online-learning). Each of the modules, except for the two designed for caregivers (Modules A-B), offer options to receive continuing education credit.

## Resources

### New VIS available for COVID and RSV

*Heidi Gurov, RN - Nurse Consultant*

A new vaccine information statement (VIS) for [COVID-19](#) vaccine and an updated VIS for [RSV](#) vaccine have been posted on the CDC website. The Immunization Unit encourages providers to begin using these VISs immediately.



### Older adults who get an RSV vaccine can use V-safe to tell CDC how they feel after vaccination

*From the Centers for Disease Control and Prevention*

Adults 60 years and older can now register for [V-safe](#) after receiving a [respiratory syncytial virus](#) (RSV) vaccine to tell CDC how they feel after vaccination.

Using a computer, smartphone, or tablet, they can go to [vsafe.cdc.gov](https://vsafe.cdc.gov) to quickly and easily share with CDC how they feel after getting vaccinated (for example, if they are experiencing injection site pain or a fever). The data collected through V-safe helps CDC monitor potential vaccine side effects and inform the public about what to expect following vaccination.

V-safe, one of [several systems](#) CDC uses to closely monitor the safety of vaccines, will soon be available for pregnant people who receive a maternal RSV vaccine and for people ages 6 months and older who receive an updated COVID-19 vaccine.

### Help promote V-safe:

- Ask your patients to sign up for V-safe at [vsafe.cdc.gov](https://vsafe.cdc.gov).
- Share [V-safe factsheets](#) with instructions on how to register and complete health check-ins.
- Hang a [V-safe poster](#) near vaccination areas.

## AMA shares guidance on talking to patients about the RSV vaccine

*Kelly Douglas, Health Communication Specialist*


On Oct. 12, 2023, the American Medical Association shared guidance on talking with patients about the new RSV vaccines. The article includes topics such as, “Which adults benefit from RSV vaccination?”, “Will you need an RSV vaccination every year like the flu shot?”, and “Is there an RSV vaccine for infants?”

Find the guidance on the [AMA website](#).

**IMMUNIZATION INFORMATION STATEMENT**  
**Respiratory Syncytial Virus (RSV) Preventive Antibody:**  
*What You Need to Know*

**Why get immunized with a RSV preventive antibody?**  
A respiratory syncytial virus (RSV) preventive antibody can prevent severe lung disease caused by RSV.  
RSV is a common respiratory virus that usually causes mild, cold-like symptoms but can also affect the lungs. Symptoms of RSV infection may include runny nose, decrease in appetite, coughing, sneezing, fever, or wheezing.  
Anyone can become infected by RSV, and almost all children get an RSV infection by the time they are 2 years old. While most children recover from an RSV infection in a week or two, RSV infection can be dangerous for infants and some young children, causing difficulty breathing, low oxygen levels, and dehydration. In the United States, RSV is the most common cause of bronchiolitis (inflammation of the small airways in the lungs) and pneumonia (infection of the lungs) in children younger than 1 year of age. Children who get sick from RSV may need to be hospitalized, and some might even die.

**RSV Preventive Antibodies**  
The RSV preventive antibody (generic name nirsevimab, trade name Beyfortus) is a shot that prevents severe RSV disease in infants and young children. Antibodies are proteins that the body's immune system uses to fight off harmful germs. Like traditional vaccines, preventive antibodies are immunizations that provide protection against a specific pathogen. While both are immunizations, the way they provide immunity is different. Nirsevimab is an immunization that provides antibodies directly to the recipient. Traditional vaccines are immunizations that stimulate the recipient's immune system to produce antibodies.  
Infants born during the RSV season (typically fall through spring) should receive a single dose of the RSV immunization within 1 week after birth. Most infants whose mothers got the RSV vaccine don't need to get nirsevimab, too. Both protect infants from severe RSV by providing antibodies, either from the mother to the infant or directly to the infant. Most infants will likely only need protection from either the maternal RSV vaccine or nirsevimab (not both). However, there may be some situations in which nirsevimab would be recommended for an infant after the mother received an RSV vaccine.  
Infants born outside of the RSV season who are younger than 8 months should receive a single dose of the RSV immunization shortly before their first RSV season (typically the fall), but infants who are younger than 8 months who have not yet received a dose may receive a dose at any time during the season.  
Some infants and young children who are at increased risk for severe RSV disease may need a single dose of the RSV antibody before or during their second RSV season.  
RSV preventive antibodies can be given at the same time as vaccines routinely recommended for infants and young children.

 U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

## CDC releases new immunization information statement for RSV preventive antibody (nirsevimab)

*IZ Express Issue 1719, October 18, 2023*

On September 25, CDC released a new Immunization Information Statement (IIS) (similar in format to a Vaccine Information Statement [VIS]), for [Respiratory Syncytial Virus \(RSV\) Preventive Antibody \(nirsevimab\)](#). This document contains important information about the new preventive antibody product for families. Access the IIS in [PDF](#) or [RTF file](#) (for use in electronic systems).

At this time, the RSV preventive antibody is not part of the Vaccine Injury Compensation Program (VICP), therefore use of the IIS is not required by federal law in the way that VIS use is required for vaccines covered by the VICP.

However, as a condition of participating in the Vaccines for Children (VFC) program, providers must give the IIS to parents in the same way that a VIS is provided.

### Related Links

- CDC: [Respiratory Syncytial Virus \(RSV\) Preventive Antibody: Immunization Information Statement \(IIS\)](#) web page
- CDC: [Respiratory Syncytial Virus \(RSV\) Immunizations](#) web page
- Immunize.org: [Vaccine Information Statement](#) main page for VISs in 47 languages

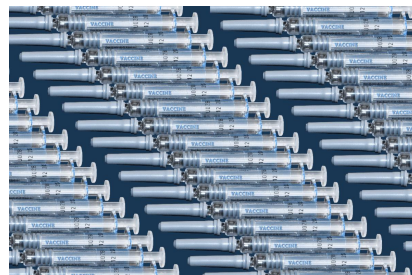
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## Summary: ACIP meeting recommending RSV vaccine during pregnancy to prevent illness in infants

*IZ Express Issue 1716, September 17, 2023*

The [Advisory Committee on Immunization Practices](#) (ACIP) met on [September 22, 2023](#), to review Abrysvo, Pfizer's respiratory syncytial virus (RSV) vaccine ("RSVpreF"). Because only one of two RSV vaccines is licensed and recommended for use during pregnancy, this summary will refer to it by its brand name. Abrysvo is licensed for use during pregnancy from 32 through 36 weeks gestation to prevent lower respiratory tract disease (LRTD) in infants. ACIP voted 11-1 to recommend seasonal (generally, September through January) use of the vaccine. All infants younger than 8 months are now recommended to receive either nirsevimab (monoclonal antibody) before or during their first RSV season or to be protected through RSV vaccination of their mother during pregnancy. In rare cases, both forms of protection may be appropriate. [Presentation slides](#) from the meeting are available online. Immunize.org describes the meeting's highlights below. Following the meeting, the CDC director [officially accepted the recommendations](#).

Please see the full [article here](#).



## Potential for dosing error with Fluzone high-dose vaccine

In the September 7 issue of its subscriber newsletter, the [Institute for Safe Medication Practices](#) (ISMP) published a safety brief on a potential for confusion about dosing caused by the packaging of [Fluzone High-Dose Quadrivalent Vaccine](#). An excerpt from the article appears below:

*We received a report about this year's FLUZONE (influenza) high-dose quadrivalent vaccine for adults 65 years and over by Sanofi Pasteur. The carton's primary display panel states it contains 10 single-dose prefilled syringes—five trays with two syringes sealed in one tray. The concern is that some may think both syringes are needed to administer a dose. If your organization purchases this vaccine, notify staff and ensure barcode scanning is used when dispensing and administering. Consider adding auxiliary labels to each tray noting that each dose requires only one syringe. If stored outside the carton, consider removing the syringes from each tray.*

ISMP published a follow-up story in its September 21 subscriber newsletter describing a report in which a patient was given two injections at one visit. If your organization purchases this vaccine, consider taking these actions:

- Notify staff about the potential for errors and remind them only one injection is needed
- Ensure barcode scanning is used where available
- Either dispense as a unit dose syringe or, if the entire carton must be dispensed, add auxiliary labels noting that each dose requires only one syringe.

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## Communication tools

*Kelly Douglas, Health Communication Specialist*

Are you looking for vaccine information to share with the public? Find free information and resources at the following links.

### Flu vaccine information

- Mountain-Pacific Quality Health recently created [vaccination graphics](#) for Wyoming providers to use.
- The Centers for Disease Control and Prevention (CDC) released [new images](#), including Spanish language images, for the "Wild to Mild" flu vaccine campaign.
- The Association of Immunization Managers created new [factsheets for communicating with patients](#).

### HPV Awareness Campaign

- The George Washington University Cancer Center created a [HPV Awareness Campaign](#) for providers.

Wyoming resources from the Immunization Unit's vaccine marketing campaign are available to [download and print or share](#).

## November Health Observances

November 11	<i>Veterans Day</i>
November 12	<i>World Pneumonia Day</i>
November 12-18	<i>National Nurse Practitioner Week</i>
November 16	<i>National Rural Health Day</i>
November 20	<i>Public Health Thank You Day</i>
November 23	<i>Thanksgiving</i>

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## Order free Thank a Vaccine posters

The Wyoming Department of Health Immunization Unit is offering free vaccination posters to vaccine providers, schools, and child caring facilities.

Posters will be shipped at no charge.

Please fill out [this Google form to ensure the posters are delivered properly.](#)

Thank you for your work bringing immunity to every community!

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# Contributors

- The Centers for Disease Control and Prevention
- Immunize.org
- Wyoming Department of Health Immunization Unit staff

Questions or comments? Email the editor at [kelly.douglas@wyo.gov](mailto:kelly.douglas@wyo.gov).

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## IMMUNIZATION UNIT

[immunizewyoming.com](http://immunizewyoming.com)



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