

# NWT Clinical Practice Information Notice

Upon receipt, please file this notice in **Section C, Clinical Practice Information Binder** for future reference.

The following clinical practice has been approved for use in the Northwest Territories Health and Social Services system, and has been distributed to:

<input checked="" type="checkbox"/>	Hospitals	<input checked="" type="checkbox"/>	Community Health Centers		Homecare		LTCF	<input checked="" type="checkbox"/>	Pharmacists
<input checked="" type="checkbox"/>	Doctors' Offices		Social Services Offices	<input checked="" type="checkbox"/>	Public Health Units				

The information contained in this document is a Departmental:									
	Policy	<input checked="" type="checkbox"/>	Standard		Protocol		Procedure		Guideline

**Title:** Pevnar 13 - conjugate pneumococcal vaccine  
**Effective Date:** September 2010

### Statement of approved Clinical Practice:

The NWT Advisory Committee on Immunization recommends Pneumococcal Conjugate vaccine for all infants born on or after January 01, 2006.

The NWT will be replacing the current Synflorix™ Pneumococcal Conjugate Vaccine (PCV-10) with Pevnar 13 Pneumococcal 13-Valent Conjugate Vaccine (PCV-13). It will be given on the same schedule as Synflorix and should be administered intramuscularly at 2, 4 and 6 months for the primary series and 18 months for the booster. Pevnar 13 is supplied in 0.5 ml suspension in a single dose syringe.

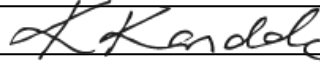
Pevnar 13 is a conjugate vaccine, adsorbed, composed of 13 active ingredients: the *S. pneumoniae* polysaccharide serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F and 23F, each conjugated to a the carrier protein diphtheria toxoid (DT). This vaccine provides protection against three additional new serotypes of *S. pneumoniae*.

Pevnar 13 will be phased in commencing September 01, 2010.

- Pevnar 13 will be the recommended primary series (2, 4, & 6 months) **for all infants born after July 1, 2010.**
- **Infants started on Synflorix™ will continue to complete the primary series.**
- **The boosters at 18 months in the fall will be Pevnar 13.**

**Attachments:** NWT Immunization Schedule

This clinical practice is approved.

  
 (signature)

Assistant Deputy Minister  Chief Public Health Officer  Director, Child & Family Services  Director, Adoptions



# NWT Immunization Schedule

Age	Vaccines	Route	Comments
Birth	Hepatitis B (TMF)	IM	
	BCG	ID	Refer to NWT Tuberculosis Manual
1 Mos	Hepatitis B (TMF)	IM	
2 Mos	DaPT Polio Act-HIB	IM	
	Men C	IM	
	Pneumococcal Conjugate (PCV – 13)	IM	See CPI # 97
4 Mos	DaPT Polio Act-HIB	IM	
	Pneumococcal Conjugate (PCV – 13)	IM	See CPI #97
6 Mos	DaPT Polio Act HIB	IM	
	Hepatitis B (TMF)	IM	
	Pneumococcal Conjugate (PCV – 13 )	IM	See CPI #97
12 Ms	Varicella	SC	
	Men C	IM	
	MMR at Separate Site	SC	
18 Mos	DaPT Polio Act HIB	IM	
	MMR at Separate Site	SC	
	Pneumococcal Conjugate (PCV – 13)	IM	
4–6 Years	DaPT-Polio	IM	
Grade 4	HPV Vaccine	IM	3 doses given during school year at 0, 2 and 6 months (also see CPI #87 for catch-up program)
Grade 9*	Tdap	IM	
Grade 12	Quadrivalent Meningococcal Conjugate	IM	1 dose. See CPI #71

\* Opportunity for catch-up : Varicella, Hep B

Routine Immunization of Adults (Previously Immunized)		
Vaccine or Toxoid	Indication	Further Doses
Diphtheria (Adult Preparation)	All Adults	Every 10 years, preferably given with tetanus toxoid (Td)
Influenza	Adults ≥ 65 years; Adults < 65 years at high risk of influenza- related complications	Every year using current vaccine formulation
Measles Mumps	All adults born in 1970 or later who did not receive 2 doses of MMR and have no history of disease	Preferably given as MMR. Refer to Canadian Immunization Guide, 7 <sup>th</sup> ed. for reference to 2-dose schedule*
Pertussis	All adults	One dose of Tdap instead of Td at least once in their lifetime
Pneumococcal (PPV-23)	Adults ≥ 65 years; adults with chronic disease that increase the risk of pneumococcal infection	None usually
Rubella Varicella	Susceptible women of childbearing age and healthcare workers	None
Tetanus	All Adults	Every 10 years, preferably given as Td
Varicella	All adults	Screen & if no history or serological evidence – immunize – 2 doses over the age of 13

\*<http://www.phac-aspc.gc.ca/publicat/cig-gci/errarta-eng.ph>