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## TRIVIA QUESTION / ANSWER

**Q:** What percentage of children entering 7th grade in Rhode Island public schools with a Rhode Island doctor have met their 7th grade immunization requirements according to data in KIDSNET?

**A:** Sixty-five (65%) of children entering 7th grade public schools this year who see a RI doctor have met their 7th grade immunization requirement according to data submitted to KIDSNET.

### INFANT MORTALITY IN RHODE ISLAND

Although infant mortality has been declining in Rhode Island (in 1975 infant mortality was 5 per 1000 live births compared to 6.5 per 1000 live births in 2013), disparities persist. The infant mortality rate among non-Hispanic black infants remains more than twice that among white infants. For 2010-2014, infant mortality was 10.8 deaths per 1000 live births among non-Hispanic black infants, compared to 4.8 deaths per 1000 live births among white infants. The overall decline and associated racial disparity is consistent with national trends.

While factors such as low birth weight, maternal complications, preterm birth, and birth defects contribute to the overall infant mortality rate, safe sleep environments have been shown to reduce infant deaths. Sleep-related infant deaths happen suddenly and unexpectedly while an infant is sleeping. The causes of sudden unexpected infant death (SUID) include unintentional suffocation, positional asphyxia, overlay (when another person rolls on top of or against the infant while sleeping), and undetermined causes.

**The Rhode Island Department of Health's (RIDOH) Family Visiting program works with families to promote safe sleep practices.** "Family Visiting's" evidence-based programs help pregnant women and families with infants and young children find resources and develop skills to raise physically, socially, and emotionally healthy children. To see if a family is receiving Family Visiting services, go to the "Family Visiting" page in KIDSNET. Referrals to Family Visiting are encouraged for safe sleep promotion and other behaviors promoting infant and child health, safety, and well-being.

### WIC UPDATE – INFANT FORMULA

The following is a message from the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) in Rhode Island.

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) in Rhode Island values our partnership with healthcare and community providers across the state. As a valued partner, we want to provide you with information regarding formula changes in the program.

WIC continues to promote and support breastfeeding as the optimal feeding method for healthy infants. When exclusive breastfeeding is not possible, WIC supports families by providing supplemental formula. As of October 1, 2016, WIC provides Abbott Nutrition's Similac Formula products due to a new rebate contract.

As part of the transition from Mead Johnson to Abbott Nutrition, it is important to note that there is a caloric difference in Abbott Nutrition's Similac products for spit-up, gassiness and fussiness. Similac Sensitive, Similac for Spit-Up, and Similac Total Comfort contain 19 calories per ounce. USDA requires that standard infant formula provided by WIC contain 20 calories per ounce. These three Similac products can be provided to infants by request of healthcare providers.

This change only affects standard infant formulas. WIC clients receiving specialized formulas or medical foods will continue to receive the same products they have been receiving.

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Although KIDSNET does not store information on baby's formula, you can find WIC agency information on the WIC page in KIDSNET, and call for more information on the formula. Children enrolled in WIC will also have information on the KIDSNET "Initiative for Healthy Weight" page. This page contains height and weight measurements, as well as body mass index (BMI) calculations and growth charts. For more information, please call the RIDOH Health Information Line at 401-222-5960.

### NEW LEAD SCREENING GUIDELINES

Medicaid has lowered the Blood Lead Level (BLL) reimbursement qualifications to 10mcg/dL. Medicaid children who have a BLL in the 10-14 mcg/dL range are now eligible to receive an Environmental Lead Inspection. The Lead Poisoning Prevention Program at RIDOH, together with Medicaid, are working to identify children with high BLLs as the first step to reducing their lead exposure. Healthcare providers are encouraged to re-test any child and their sibling(s) under 6 years old who fall into the new reimbursement qualification range, and encourage eligible families to accept the Environmental Lead Inspection service.

Environmental Lead Inspection results are available in KIDSNET on the "Lead Poisoning" page. Providers can run three lead reports from the KIDSNET Practice Reports page:

- Children without a lead screening
- Children due for a second lead screening
- Children with BLL results > 5ug/dl

### IMMUNIZATION PROVIDER CONFERENCE – REGISTER NOW

The Immunization Program will be holding its Provider Conference on Thursday, November 17, 2016 at The Crowne Plaza Hotel in Warwick. The topic is Vector Borne Emerging Infectious Diseases. Immunization Program updates regarding school vaccination requirements and the latest ACIP recommendations will be provided as well.

**Space is limited – please register now.**

Registration is currently open at this link: [https://apps.biomed.brown.edu/cme\\_registration/product\\_info.php?products\\_id=347](https://apps.biomed.brown.edu/cme_registration/product_info.php?products_id=347)

### FLU SEASON PREPARATION

Flu season is here. CDC recommends a yearly flu vaccine as the first and most important step in protecting against the flu. Everyone 6 months of age and older should get a flu shot every year. Some children 6 months through 8 years will require two flu shots this season.

The current recommendation is that children 6 months through 8 years of age need only one dose of 2016-2017 seasonal influenza vaccine if the child has previously received two or more total doses of trivalent or quadrivalent influenza vaccine before July 1, 2016. The two doses do not need to have been given during the same season, or during consecutive seasons. Children 6 months through 8 years getting vaccinated for the first time, and those who have previously gotten only one dose of vaccine, will need two doses.



**Note:** only the injectable flu vaccine (flu shot) should be used this season. The CDC does not recommend use of the nasal spray flu vaccine (also known as "live attenuated influenza vaccine" or LAIV / "Flumist") for the 2016-2017 season due to ineffectiveness.

To determine which patients are due for their yearly flu vaccine, log in to KIDSNET and run the "Due Now for Flu" vaccine report. This report can be found on the Practice Reports page in KIDSNET under "Seasonal Reports". This report will generate a list of children who are due for their annual flu vaccine according to the information reported to KIDSNET.

### CURRENT DATES OF VACCINE INFORMATION STATEMENTS (VIS) AS OF AUGUST 9, 2016

If you have outdated VISs, visit our website to order current versions.

<http://www.health.ri.gov/order/publications/resultsbyparameter.php?audience=%20ALL&topic=Immunization>

Adenovirus	06/11/2014	HPV-Gardasil 9	03/31/2016	PPSV	04/24/2015
Anthrax	03/10/2010	Influenza	08/07/2015	Polio	07/20/2016
Chickenpox	03/13/2008	Japanese enceph	01/24/2014	Rabies	10/06/2009
DTaP	05/17/2007	MCV4/MPSV4	03/31/2016	Rotavirus	04/15/2015
Hib	04/2/2015	MenB	08/09/2016	Shingles	10/06/2009
Hepatitis A	07/20/2016	MMR	04/20/2012	Td	02/24/2015
Hepatitis B	07/20/2016	MMR/V	05/21/2010	Tdap	02/24/2015
HPV-Cervarix	05/03/2011	Multi-vaccine	11/05/2015	Tdap	02/24/201
HPV-Gardasil	05/17/2013	PCV13	11/05/2015	Yellow fever	03/30/2011