



Vaccine Preventable Diseases and Travel Health FAQs for Other Prescribers and Health System Partners

GLOSSARY OF ACRONYMS

AEFI – Adverse Event Following Immunization

ISTM – International Society of Travel Medicine

medSask – Medication Information Service, University of Saskatchewan

NACI – National Advisory Committee on Immunization

NAPRA – National Association of Pharmacy Regulatory Authorities

PAR – Pharmacist Assessment Record

PHAC – Public Health Agency of Canada

SCPP – Saskatchewan College of Pharmacy Professionals

SIM – Saskatchewan Immunization Manual

USask CPE – USask Continuing Pharmacy Education, College of Pharmacy and Nutrition, University of Saskatchewan

VPDTH – Vaccine Preventable Diseases and Travel Health

INTRODUCTION

On April 5, 2019, SCPP bylaws authorized pharmacists to prescribe certain drugs and vaccines for preventable disease in Canada and abroad. [SCPP's policy and framework](#) specifies the competency standards and other requirements for pharmacists to prescribe for preventable diseases. It is SCPP policy that all vaccines, except influenza, are now Schedule I (prescription only). This includes common vaccines previously dispensed without a prescription such as Dukoral® or Gardasil®.

This document has been prepared for physicians, other prescribers and health system partners to address questions regarding pharmacists prescribing for VPDTH.

FAQs

1) Which preventable diseases may a pharmacist prescribe for in the context of VPDTH?

Cholera (oral, inactivated vaccine only)	Diphtheria	Hepatitis A	Hepatitis B
Haemophilus Influenzae Type B	Herpes Zoster	Measles	Pertussis
Human Papillomavirus	Polio	Rubella	Tetanus
Traveler's diarrhea	Pneumococcal	Meningococcal	Varicella Zoster

In addition to the above, a pharmacist with the ISTM Certificate in Travel Health may prescribe for:

European Tick-Borne Encephalitis	Cholera	Rabies (for prophylaxis only)	Typhoid
Japanese Encephalitis	Malaria	Altitude Illness	Yellow Fever

2) Are all pharmacists required to prescribe for VPDTH?

No. Pharmacist participation is voluntary and they can choose the level of services they want to provide. VPDTH can be broken down into the following categories:

- a) Vaccine Preventable Diseases – domestic immunization
- b) Low risk travel health for low risk patients
- c) Moderate to High Risk Travel Health Services (includes moderate to high risk patients, activities and destinations as outlined in the medSask guidelines) **Can only be prescribed by an ISTM certified pharmacist**

Examples of Moderate to High Risk Patients and Activities

- Chronic illness, immunocompromised, pregnancy
- Visiting friends and relatives, volunteers, missionary aid work, students abroad, mass gatherings, adoption abroad, seeking health care abroad
- Wilderness expeditions, mountain climbing, scuba diving, caving, etc.

Source: medSask Vaccine Preventable Disease and Travel Health Guidelines

3) What training is required for a pharmacist to administer a drug by injection?

- a) A Canadian Council for Continuing Education in Pharmacy accredited training program which is mapped against the NAPRA approved competencies on injection for Canadian Pharmacists. The NAPRA competencies include:
 - PHAC 14 Immunization Competencies for Health Professionals; and
 - 1 additional NAPRA Competency for injection of other substances
- b) Standard First Aid and CPR Level C with AED
- c) A Saskatchewan-specific module which was developed to ensure pharmacists understand the Saskatchewan Immunization Program, including publicly funded vaccines.

d) A 5 hour live clinical training session which is an interactive, hands-on workshop where pharmacists put into practice the skills of administering subcutaneous and intramuscular injections.

This training covers foundational information that is built upon further in the VPDTH training.

4) What training is required for a pharmacist to prescribe for VPDTH?

a) Domestic Immunizations and Low Risk Travel Health for Low Risk Patients

USask CPE training is strongly recommended for all pharmacists prescribing for VPDTH. Prescribing in conjunction with the public health system can be operationally complex and the training will address these issues.

USask CPE provides training that allows pharmacists to:

- Gain knowledge that is foundational to VPDTH services.
- Assess their gaps in skills, knowledge and abilities to deliver this service safely and effectively.
- Navigate the mandatory medSask prescribing guidelines and forms.
- Understand the public vs private systems of vaccine immunization.

b) Travel Health for Moderate to High Risk Patients, Activities and Destinations

The International Society of Travel Medicine (ISTM) Certificate in Travel Health is required. This program provides:

- Knowledge excellence in the field of travel medicine.
- Tools that provide current information.
- A requirement for ongoing education.

For more information on the ISTM Certificate of Knowledge program please see

<https://www.istm.org/certificateofknowledge>

5) How can I be assured my patients are receiving safe care?

As professionals, pharmacists are expected to identify when it is in the best interests of the patient to refer to public health or another health provider.

MedSask has published prescribing guidelines that pharmacists are required to follow for the assessment, documentation and follow-up of VPDTH. These medSask prescribing guidelines direct pharmacists to patient-specific information in existing expert immunization guidelines and relevant literature.

The medSask prescribing guidelines and forms are mandatory to ensure quality standards are met and records are accurate and consistent. They have been prepared by subject matter experts to be compatible with pharmacy practice needs, SCPP standards and public health system expectations.

For travel health, a subscription to a travel health service such as Travax or Tropimed is required. This ensures pharmacists are providing patients with current, country specific printed travel reports and staying informed about disease outbreaks.

6) Is it a conflict of interest to prescribe, dispense and administer vaccines and other drugs for VPDTH?

Conflicts of interest are common in pharmacy practice but can be effectively managed with informed patient consent and transparency as addressed in the USask CPE training. For example, transparency can be achieved through effective collaboration with others in the healthcare system, documentation, providing the PAR to the patient's primary practitioner, and informing patients when they are eligible for publicly funded immunization options.

7) How will I be notified that my patient has been prescribed a vaccine?

The pharmacist will fax the PAR (Pharmacist Assessment Record) to the patient's primary practitioner:

- [Primary Healthcare Provider Notification](#) will be used for domestic immunizations
- [PAR – Travel Health](#) will be used for Travel Health prescribing

8) How will my patient's immunization record be kept up to date?

Pharmacists must document the administration of vaccines according to recognized vaccination data quality standards and provide the patient with a paper record of their vaccination. Pharmacists must also provide the patient with instructions on how they may have their vaccinations recorded on their public health vaccination record. This is a similar approach to other provinces, as patients only get paper records.

9) What will happen if my patient gets an adverse event following an immunization (AEFI) from a vaccine that a pharmacist prescribed?

As outlined medSask's [AEFI Quick Reference Tool for Pharmacists](#), a pharmacist must:

- Know the difference between minor, moderate and major reactions following vaccination and be able to respond appropriately; and
- Counsel the patient to notify the pharmacist right away if a reaction occurs.

If an AEFI has occurred, the pharmacist must submit the completed AEFI form to the patient's primary practitioner and Health Canada.

- The pharmacist who prescribed the vaccine, in collaboration with the patient's primary practitioner, makes a decision going forward for future vaccination (continuing the series, etc.).
- The pharmacist who filled out the AEFI form is to communicate this decision to the patient.

The AEFI form is only sent to Public Health if the AEFI is following the publicly funded influenza vaccine.

10) What are the public health system expectations for pharmacists providing these services?

Besides common data and documentation standards, important expectations are:

- Read, understand and know how and when to use the SIM (see Question #11)
- Understand and know how to use other authoritative references
- Establish effective working relationships to collaborate with local Public Health offices/clinics
- Perform appropriate assessments of patient needs
- Dispense and administer vaccines to meet those needs according to public health principles
- Notify Public Health or other providers when unable to meet those needs
- Educate patients about healthy travel behaviors
- Document and report adverse events following immunization

11) What communication has been provided to pharmacists regarding the Saskatchewan Immunization Manual (SIM)?

- It is the responsibility of all immunizers to ensure that they are using the most current version of the SIM posted on the Ministry of Health website.
- SIM should be used to assess patient's eligibility for a publicly funded vaccine.
 - When a patient is eligible for a publicly funded vaccine, pharmacists must provide the patient with the option to access the vaccine free of charge from the proper health authority.
- SIM provides evidence-based and standardized immunization-related information for the provincial **publicly funded** immunization program.

- Pharmacists must understand that the SIM does not necessarily speak to the NACI recommendations or eligibility as per product monograph. The intent of the SIM has been to guide public health immunization practice, therefore there are limitations to its use by non-public health providers. For example, AEFI and cold chain breaks are reported differently by non-public health providers for privately purchased vaccines.