



The Immune Response

May 2001

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CSL

Vaccines

Please copy and distribute to all immunisation providers in your practice or health centre. Thank you.

Dear Practice Manager

Could you please photocopy The Immune Response and distribute it to all the people in your practice who give immunisations, including the practice nurses. Thank you.

Yours faithfully

Gae McDonald, Immunisation Project Officer
Northern Rivers Division of General Practice

The purpose of conscientious objection forms

The conscientious objection form was introduced for one purpose only - to provide parents with access to the Government's family payments, administered by Centrelink, that are linked to immunisation (Maternity Immunisation Allowance and Child Care Benefit).

Parents who do not want their children immunised may ask their doctor or immunisation provider to complete a conscientious objection form. After the HIC processes this form, the ACIR will no longer flag the child in question as 'overdue' for Centrelink purposes. The form is a legislative requirement that is documented within the Child Care Legislation Amendment Act.

Data taken from the form is not used for any other purpose. It is not used in GPII practice coverage calculations, the ACIR national coverage

calculation, or in the determination of a child's immunisation status for ACIR due and overdue reports.

The form is only used to declare a conscientious objection to immunisation - not to a particular vaccine. Therefore, if a parent does not want their child to receive a particular vaccine, but is happy for them to be given all other standard childhood vaccines, the parent is choosing that their child will never be up to date for particular antigens.

It is important to note that a provider will not receive an ACIR information payment or GPII (SIP and Outcomes) payment if a vaccine required to complete an individual schedule is not given because the parent objects to that vaccine, although the provider has given the other vaccines and has reported this information to the ACIR.

B R I E F S

REMINDERS

Schedule for 12 month olds

Children turning 12 months of age are required to be vaccinated using PedVax and MMR. Please note that this is a change from the old schedule where they were only required to have MMR.

MMR dose 2

All children born on or after 1 January 1995 are required to have a second dose of the MMR as part of the 4-5 year schedule. Failure to have this dose will mean that the child will be assessed as not being age appropriately immunised when they reach six years of age (for children on a pre-2000 ASVS).

ACIR DATA COLLECTION - HOT ISSUES

Hib Schedules

Since the introduction of the 2000 Australian Standard Vaccination Schedule (and the new multivalent vaccines), many more children are now receiving mixed Hib vaccine products (ie. both Hib schedule A & B products). As the national Due and Overdue Rules for Childhood Immunisation 2000 state: "If the child receives any dose of a Hib-schedule A vaccine (Hib Titer) then the 4-dose course for schedule A must be followed rather than the 3-dose course for schedule B (PedVax) (although vaccines from either the Hib-schedule A or Hib-schedule B series are interchangeable and either may be used)."

Fridge thermometers

There have been many requests for new thermometers for vaccine fridges. Originally Smith KleinBeecham provided them to practices. They are no longer available. The thermometer recommended at the moment is Dual Display Thermometer, with min and max, \$42.95, cat# 630-1024 from Tandy.

Revamped NRDGP website

Check out the NRDGP's website on < www.nrdgp.org.au >. It has recently been revamped and the division is currently uploading all its information on immunisation. This will include a bank of patient information articles and links to other informative websites.