

## MMR (Priorix) – 3 years and over pre-vaccination screening tool

This guide is only for use when delivering MMR (Priorix) as a single vaccine. Please refer to the standard pre-vaccination screening tool when delivering multiple vaccines - immune.org.nz/factsheets/pre-vaccination-screening-tool

MMR is a live vaccine. You must check for possible pregnancy, immune system disorders, medications affecting immunity (i.e. immunosuppressants), recent blood product or immunoglobulin, transplant, or specialist care as outlined in screening questions below.

Questions	Rationale
Name, age and DOB	Identify AIR records and clarify age.
Confirm eligible for MMR vaccine	Born <b>after 1 January 1969</b> with no evidence of 2 documented doses given after 12 months of age.  People <b>born before 1969 and who grew up in New Zealand</b> are considered immune due to natural infection when measles was widespread, even if they don't remember having it. People born overseas who did not live in NZ prior to 1969 may require MMR vaccination, depending on their country of birth - see next page.
Vaccine history: Have you/your child received any other vaccines (including travel vaccines) in the past month?	Confirm with AIR.  Ensure a minimum 4-week gap between doses of MMR vaccine.  MMR may be given on the same day as other live vaccines (including Varicella, BCG, Qdenga [dengue fever vaccine] and Imojev [JE vaccine], or separated by a minimum 4-week gap. Orally administered live vaccines (e.g. rotavirus) do not need to be spaced 4 weeks apart from MMR.  Co-administration of the yellow fever vaccine and MMR vaccine on the same day is acceptable, but it is preferable to separate the administration by at least 4 weeks if possible, due to potential diminished immune responses.  There is no minimum interval required between MMR and non-live vaccines.
Are you/your child well today?	General screening for acute moderate/severe illness. Fever over 38°C – delay vaccination. Do not delay immunisation for runny nose or mild illness.
Allergies:  Have you/your child ever had a serious allergic reaction to anything – in particular a vaccine?	Screen for history of anaphylaxis to a vaccine or the vaccine components (neomycin, lactose, amino acids, mannitol & sorbitol).
<b>Pregnancy:</b> Are you pregnant, or trying to get pregnant?	If yes, MMR is contraindicated, do not administer.  Women should be advised to avoid getting pregnant for 4 weeks after the administration of a live vaccine.  Recommend Tdap (from 16 weeks) and influenza vaccine.
Medical conditions:  Do you or your child have, or have you had, any medical conditions or regularly take any medications? Specifically:  • immune system conditions  • bleeding/blood conditions	For immune system concerns, refer to all questions below.  If concerns with bleeding, or on blood thinners, apply pressure to the site for 2 minutes. Do not rub.
Immune-compromising conditions:  Do you/your child have any immune system problems you know of?  For example: Cancer, stem cell therapy, transplant, transfusion, blood disorders, HIV/AIDS – anything affecting immune system. Or are you seeing a specialist doctor?	If yes – live vaccines <b>may be contraindicated</b> , or a specialist opinion required.  Refer to Chapter 4.3 of the Immunisation Handbook – sections 4.3.2 and 4.3.3. Or call 0800 IMMUNE (0800 466 863).  For children, you can also refer to: starship.org.nz/for-health-professionals/starship-clinicalguidelines/i/immunosuppression-infection-and-immunisation-in-rheumatology/

Immunosuppressive treatment: In the past 12 months, have you taken medication affecting the immune system (i.e. immunosuppressants) For example: Oral steroids for asthma, sarcoidosis, and COPD, medication for cancer, rheumatoid arthritis, Crohn's, ulcerative colitis, psoriasis, e.g. DMARDs or biologics?	If yes – live vaccines <b>may be contraindicated</b> , or a specialist opinion required.  Refer to Chapter 4.3 of the Immunisation Handbook – section 4.3.4 including table 4.1; section 4.3.5 including table 4.2; and section 4.3.6. Or call 0800 IMMUNE (0800 466 863).
Blood products: Have you received any blood products in past 12 months? Are you due to receive immunoglobulin or blood?	If yes – refer to Table A6.1 in <u>Appendix A6.4 of the Immunisation</u> <u>Handbook</u> to identify the blood product received and recommended interval. Or call 0800 IMMUNE (0800 466 863).

Post-vaccination advice	
Post-vaccination advice including written information on possible side effects:  • Common • Serious but rare • Vaccine specific reactions  Reminder to book in for second dose of MMR a minimum of 4 weeks later if needing to complete a 2-dose course.	<ul> <li>Have post-vaccination info to supply, or on wall for photo. Must cover verbally.</li> <li>Highlight common responses:         <ul> <li>Measles component: fever and or mild rash 6-12 days after immunisation</li> <li>Mumps component: fever and/or mild swelling under the jaw 10-14 days after immunisation</li> </ul> </li> <li>Rubella component: Fever, mild rash and/or swollen glands 2-4 weeks after immunisation</li> <li>Temporary joint pain 2-4 weeks after immunisation (more common in adult women).</li> </ul>
Advise consumer of observation time	20 minutes
Ask consumer:  Do you have any questions?  Do you agree to your MMR vaccine today?	Informed consent

Consider MMR vaccination needs by age groups		
70 years or older	People aged in their 70s and older do not need an MMR vaccine	
Mid-50s and 60s	People aged in their mid-50s and in their 60s are very unlikely to need a vaccine, but it can be considered if necessary, e.g., documented doses required for occupational health, or those who grew up in countries which introduced measles vaccine earlier than NZ (USA, Bermuda & Malta 1957; Latvia 1958; Slovenia 1960; Switzerland 1964; Netherlands & Argentina 1965; Australia 1966; Hong Kong 1967; Slovakia 1968). People may receive the vaccine if born after the date of measles vaccine introduction in that country.  People who lived in countries with limited circulating measles (including remote Pacific islands) prior to 1969 may not be immune to measles if not previously immunised with a measles-containing vaccine and can be considered for MMR.	
Adults up to mid-50s	People aged younger than mid-50s need MMR if they do not have a clear record of two doses of measles-containing vaccine or confirmed measles	
Overseas vaccination records	It is important to check vaccine history for children vaccinated overseas to ensure any missing MMR vaccines are offered as part of a priority child catch-up vaccination programme.	
NOTES:	•	

- Repeating MMR doses is safe, even if the person is already immune to measles, mumps, or rubella provided there are no contraindications to vaccination.
- If no documentation of prior vaccination available and consumer is recommended for MMR, they can receive two doses given at least 4 weeks apart.

## **Eligibility for free MMR vaccines**

- MMR is free for those aged under 18 years and for adults over 18 years who are eligible for funded health care in NZ.
- MMR is also free for anyone when recommended by a local public health unit following contact tracing.
- Priorix is available for private purchase in boxes of 10 doses via HCL for those who aren't eligible for funding. Publicly funded vaccine stock should NOT be used for these vaccinations.

## Call 0800 IMMUNE (0800 466 863) for clinical advice