

### Continue to think about and test for pertussis

Consider pertussis when seeing infants and children with prolonged coughs and pertussis-like symptoms. Testing for pertussis early is important so treatment can be started to prevent serious complications and death, especially in infants. Nasopharyngeal specimens for PCR are the recommended specimen and test during the first couple of weeks of cough, serology is recommended later in the illness. If you have patients who are unable to afford or access testing for pertussis, please reach out to MDH for potential resources (1-877-676-5414). For information on testing and treating for pertussis and, other materials visit [Pertussis Information for Health Professionals \(www.health.state.mn.us/diseases/pertussis/hcp/index.html\)](http://www.health.state.mn.us/diseases/pertussis/hcp/index.html).

### New ROTARIX liquid formulation

On Nov. 4, 2022, the FDA approved an oral-dosing applicator-only presentation (liquid formulation) of ROTARIX. This new formulation does not require reconstitution and will be available for ordering in March 2023. There will be two ROTARIX presentations available until early 2025 when the lyophilized formulation (that requires reconstitution) will retire.

### New ROTARIX liquid formulation dose, route, and storage

- Single 1.5 mL dose, oral route, **no reconstitution**.
- Prefilled oral dosing applicator with a plunge stopper.
- Store at 2° to 8°C (36° to 46°F).
- **Do not freeze. Discard if the vaccine has been frozen.**
- **Keep in original package to protect from light.**

### ROTARIX lyophilized formulation dose, route, and storage

- Single 1 mL dose, oral route, **must be reconstituted**.
- Single dose vial of lyophilized vaccine component, prefilled oral dosing applicator with 1 mL liquid diluent with a plunger stopper, and transfer adapter for reconstitution.
- Store vials at 2° to 8°C (36° to 46°F) and **protect from light**.
- Store diluent in oral dosing applicator at 2° to 8°C (36° to 46°F) or at room temperature up to 25°C (77°F).
- **Do not freeze. Discard if the diluent has been frozen.**
- Refer to the package insert for storage after reconstitution.

### To avoid vaccine errors

- Use up current ROTARIX lyophilized formulation (that requires reconstitution) first before using the new liquid formulation.
- Educate staff on how to prepare and administer the ROTARIX formulation(s) in stock.
- Refer to [CDC: Potential Questions and Answers for the New Liquid Formulation ROTARIX Licensure \(www.cdc.gov/vaccines/vpd/rotavirus/hcp/rotarix-licensure-faq.html\)](https://www.cdc.gov/vaccines/vpd/rotavirus/hcp/rotarix-licensure-faq.html) for more information.

### Resources

- [FDA: ROTARIX Package Insert and Patient Information \(Vial with Oral Dosing Applicator Presentation and Oral Dosing Applicator Only Presentation\) \(www.fda.gov/media/163009/download\)](https://www.fda.gov/media/163009/download).
- [GSK: ROTARIX \(Rotavirus Vaccine, Live, Oral\) for HCPs \(www.rotarixhcp.com/\)](http://www.rotarixhcp.com/).

If you have questions about clinical vaccine information or for vaccine recommendations and schedules email [Health.vaccineSME@state.mn.us](mailto:Health.vaccineSME@state.mn.us).

### By federal law, you must provide current Vaccine Information Statements (VISs)

Federal law requires anyone who vaccinates to give all patients, or their parents or legal guardians, the appropriate VIS before giving vaccines. Check your stock of VISs against this list. If you have outdated VISs, get current, printable versions at [Immunize.org](http://www.immunize.org) [Vaccine Information Statements \(VISs\) CDC information sheets for patients \(www.immunize.org/vis/\)](https://www.cdc.gov/vaccines/imz/downloads/patients/).

### Dates of Current VISs, as of November 2022

VIS	Current version
Adenovirus	1/8/20
Anthrax	1/8/20
Cholera	10/30/19
Dengue	12/17/21
DTaP	8/6/21
Ebola	6/30/22
Hepatitis A	10/15/21
Hepatitis B	10/15/21
Hib	8/6/21
HPV	8/6/21
Influenza	8/6/21
Japanese enceph	8/15/19
MenACWY	8/6/21
MenB	8/6/21
MMR	8/6/21
MMRV	8/6/21
Multi-vaccine	10/15/21
PCV	2/4/22
PPSV	10/30/19
Polio	8/6/21
Rabies	6/2/22
Rotavirus	10/15/21
Smallpox/monkeypox	11/14/22
Td	8/6/21
Tdap	8/6/21
Typhoid	10/30/19
Varicella	8/6/21
Yellow fever	4/1/20
Zoster	2/4/22