



**POSITION STATEMENT OF  
MONTANA MEDICAL ASSOCIATION  
ON  
PHARMACIST PRESCRIBED IMMUNIZATIONS  
ADOPTED SEPTEMBER 13, 2014**

The Montana Medical Association (MMA) supports efforts to improve the immunization rate for children and adults in Montana. We recognize that important health care efforts like this are best accomplished with all professionals working together towards a common goal. A collaborative, patient centered approach to delivering this necessary health care service will result in best outcomes for our population. The MMA recognizes that pharmacists are an integral and ongoing component of the health care team, and in many areas are critical to providing best patient care. There is a role for pharmacists in the education of patients and caretakers regarding the importance of vaccinations. The MMA has supported this role with regard to the administration of straightforward and uncomplicated adult vaccinations as a capability of pharmacists independent of direct collaboration with physicians.

The MMA strongly endorses maintaining this collaborative approach that exists in current law to the administration of vaccines but recognizes that, especially with children and at-risk populations, this important preventative health care service can be very complex. There are many aspects of vaccine administration that need to be carefully considered including patient risk, individual preferences and beliefs, complex dosing schedules of many potentially interacting vaccines, potential for adverse reactions, documentation, and reporting. Given the very complex nature of vaccine dosing, administration, and follow up in this vulnerable population, the MMA strongly believes that the pharmacists should not be administering these complicated immunizations to children and other at risk populations without close collaboration with other members of the health care team. Specifically, this has to include an established collaborative agreement with physician offices, and the responsibility to report into an electronic system readily accessible to other health care providers. For the specific reasons discussed below, the MMA cannot support the desire of pharmacists to administer additional immunizations, especially in pediatric patients.

Many families are not willing or able to follow the standard immunization schedule as outlined by the Centers for Disease Control and Prevention (CDC). As a result, administration of appropriate vaccinations becomes even more complicated. The professional administering vaccines must not only know the standard schedule, but must be up-to-date with current catch-up recommendations as they are published by the CDC, and be in a position to negotiate next best steps and sequencing with the parents. This ability is best accomplished and in fact may only be accomplished within an ongoing patient centered relationship and the knowledge base of a physician's or health department office.

It is not uncommon for a family not to have a complete immunization record. The health care team cannot rely on the parents' memory alone to ensure that their immunization record is accurate. For this reason, it is critical that everyone who administers immunizations report immunizations given to the Montana state registry ImTRAX. This statewide reporting system allows providers access to accurate records so that the child is not over or under immunized.



Adverse effects can occur as a result of administration of immunizations. It is critical that any entity that delivers immunizations has an adequate system for answering questions from families regarding adverse effects after the immunizations have been given. This often times can be in the form of phone calls which can occur during general office and after-clinic hours. If the pediatric patient is administered the vaccination through the pharmacy and there's no follow-up available, then likely the family will call their pediatrician who will have no knowledge about the immunization given. This puts the pediatrician in a very difficult situation. Furthermore, given the possibility that an adverse reaction would occur, the pharmacy would need to be in the position to recognize the type and severity of the adverse reaction, provide appropriate counseling about dealing with a reaction, and be able to submit an adverse reaction report to the nationwide Vaccine Adverse Event Reporting System (VAERS).

It is not uncommon for a child to appear in a physician office requesting specific immunizations. After reviewing the patient's record, it is frequently found that there are other vaccinations needed. The physician has the duty and ability to review the records and ensure that the child is fully vaccinated rather than simply administering the vaccinations that the parent thinks their child needs. This process carried out in the physician clinic allows for greater immunization coverage. To function as an effective health care partner, the pharmacist would need to have the ability to access patient records and counsel the family on all immunizations recommended. This ability does not exist at this time.

To achieve the desired outcome of increasing the immunization rate in Montana, the MMA proposes that any immunization, excepting those now allowed under state law, be administered by a trained pharmacist only if the pharmacist is in receipt of a prescription (written or electronic) from a physician or other prescriber, or if that pharmacist has a collaborative agreement in effect with a treating provider to administer vaccines to patients of that provider. The administering pharmacies would have to interface with the state immunization reporting program ImTRAX on a daily basis to document vaccinations administered. Any pharmacist meeting these basic requirements to administer vaccines would also have training on best immunization practices as recommended by the CDC. This would allow the entire health care team to know what vaccinations are being administered, ensure appropriateness of these immunizations, and provide for appropriate and timely documentation when given.

The MMA believes that the success of health care reform and efforts to promote the integration of care will depend on the effective collaboration of physician leaders with other health care professionals, and especially pharmacy professionals. To avoid the fragmentation of care, and ensure the best outcomes for all patients, the MMA feels strongly that pharmacists should not administer these complex immunizations without physician collaboration, adequate training guided by the CDC, and the responsibility to promptly report into an electronic system accessible to other providers.