Criteria for Clinics Providing Yellow Fever Vaccinations

To be authorized to provide yellow fever vaccination as part of an international travel health clinic by the Minnesota Department of Health (MDH), a facility must agree to:

1. Provide comprehensive personal travel consultation and risk assessment to patients before and after international travel, including:
   a. Having knowledgeable staff with training and experience in the field(s) of Travel Medicine, Tropical Medicine, and/or Infectious Diseases.
   b. Providing geographically defined information regarding precautions and considerations when traveling such as the prevention and management of injuries and foodborne, waterborne, vectorborne, and sexually transmitted diseases.
   c. Response to special concerns or issues of patients with diverse medical conditions, such as those who may be pregnant or immunocompromised, and those traveling with infants and children.
   d. Accessible hours for patients to use the facility, e.g., including Saturdays and/or evenings.
   e. The availability of an infectious disease practitioner to provide consultation, either as part of the facility’s staff or as an identified adjunct to it.
   f. Knowledge of and ability to recognize signs and symptoms of common diseases in returning travelers.

2. All clinical staff, including physicians, physician’s assistants, nurse practitioners, registered nurses, licensed practical nurses, medical assistants, etc, who are prescribing or administering yellow fever vaccine must complete the Yellow Fever Vaccine Course at the Centers for Disease Control and Prevention (CDC) website at www.cdc.gov/travel-training/. A Continuing Education Certificate for each staff member must be submitted to MDH prior to receiving authorization to provide yellow fever vaccination as part of an international travel health clinic.

3. Provide yellow fever vaccinations to all individuals requesting services including persons who are not in the facility’s primary patient population. Note: MDH does not expect facilities to provide this service at no cost. It is left to the discretion of the individual provider to determine the cost and payment arrangements.

4. Provide travel vaccinations to include hepatitis A, hepatitis B, polio, measles, mumps, rubella, tetanus, diphtheria, pertussis, pneumococcal, meningococcal meningitis, rabies, rotavirus, human papillomavirus, varicella, zoster, Japanese encephalitis, typhoid and yellow fever. The facility must also provide prophylaxis for malaria.

5. Ensure that a physician will be immediately available to handle any severe adverse reactions, which are more common though still rare with travel vaccines.

6. Ensure that a protocol is in place regarding anaphylaxis treatment, that staff receive training, and that the protocol and training are reviewed annually. In addition, the clinic must demonstrate appropriate and adequate knowledge of basic life support and CPR.

7. Have an agreement with a laboratory to test and diagnose parasite infections.

8. Have appropriate vaccine storage units for vaccine, including not using combination refrigerator/freezers with one exterior door, or dormitory-style refrigerator/freezers.

9. Ensure appropriate storage and handling procedures are in place for all vaccines, following best practices standards as described in the Vaccine Storage and Handling Guide from CDC at www.cdc.gov/vaccines/recs/storage/default.htm and the CDC Vaccine Storage and Handling Toolkit, available online at www.cdc.gov/vaccines/recs/storage/toolkit/default.htm. Review procedures annually.
10. Demonstrate adequate resources for acquiring up-to-date information on travel recommendations, restrictions, and requirements, e.g., CDC’s “Yellow Book” and travel website, www.cdc.gov/travel/default.aspx; travel warnings of the U.S. State Department; the World Health Organization’s International Travel and Health Vaccinations Requirements and Health Advice; and TRAVAX at www.shoreland.com/.

11. Demonstrate knowledge and understanding of the procedure for reporting vaccine adverse reactions to the federal Vaccine Adverse Event Reporting System (VAERS) and to MDH.

12. Ensure that the clinic obtains one official yellow fever vaccination stamp specifically registered to it by MDH, using the Minnesota license number of a provider currently practicing at the facility. This number will be on file at MDH and CDC. If the provider, whose license number is on the stamp leaves the clinic, ensure that a new stamp is obtained and the old one is mailed to MDH. If a stamp is lost or stolen, report it to MDH immediately.

13. Only administer yellow fever vaccine at the address indicated in the certification letter, and never redistribute the vaccine to other sites.

14. Participate in periodic workshops and conferences directly related to travel medicine.

15. As requested, complete an MDH form updating contact information for the clinic every other year and participate in a facility site visit by MDH staff.