

Case Study

ACE Card for Influenza Vaccine for Older Persons

With this issue, MPM launches a new resource to help busy clinicians manage common senior conditions. ACE (Acute Care for the Elderly) Cards are geriatric reminder cards developed by Dr. Michael Malone and his colleagues at the Aurora Sinai Medical Center in Milwaukee, WI. Presented on these

pages as a Case Study, ACE Cards, like the Beers Criteria, are evidence-based resources that improve the quality of services delivered to Medicare patients. The cards offer guidelines for assessment of a particular behavior and list risk factors as well as suggestion for an initial approach.

This issue presents the ACE Card for the Influenza Vaccine. Future issues will include ACE Cards on subjects that include fall prevention, indicators of infection, identifying delirium, and constipation. The complete series of cards can be ordered from Dr. Michael Malone at Michael.Malone.md@aurora.org.

A nurse is preparing an older patient for her discharge from the hospital. Mrs. Sanchez is an 80-year old Hispanic woman who lives with her family and had been admitted to the hospital 4 days ago with dehydration and pneumonia. The patient received an interdisciplinary approach to her care, now ambulates with a walker, and, is back to baseline functional status. She responded well to the pneumonia protocol, early physical therapy, and careful intravenous fluids. Her medications have been switched to oral tablets and reconciled with her home meds. She cannot recall if she has had her Pneumovax[®] 23 previously. The nurse asks her attending physician to sign standing orders for influenza vaccine and pneumococcal vaccine. The nurse and physician quickly review the ACE Card for assistance. MPM

Michael Malone, MD, is Medical Director of Senior Services at the Aurora Sinai Medical Center's Geriatrics Institute in Milwaukee, WI.



ACE Cards © Influenza Vaccine

Acute Care for the Elderly (ACE) Program
Aurora Sinai Medical Center/UW Medical School

Health Care Behavior: Vaccinate older persons with “flu shot” influenza vaccine at the time of their hospital discharge.

- Do not vaccinate if patient has anaphylactic egg hypersensitivity or allergic reaction following occupational exposure to egg protein.
- Ask the patient if he/she has already had flu shot this season.

Background: Influenza is a major cause of morbidity and mortality in the elderly. Influenza vaccine reduces rates of respiratory illness, hospitalization and mortality in the elderly. Influenza vaccine must be administered yearly due to antigenic drift and short-lived protection (4-5 month) provided by the vaccine. Currently recommendations are for all patients over age 65 or with underlying medical illnesses to be immunized annually. Medical personnel and caregivers for high-risk patients should also be immunized. Potential adverse effects include fever, chills, myalgias and malaise. The influenza vaccine is a killed virus that is modestly immunogenic, with an estimated efficacy rate of 70 percent for illness and 90 percent for mortality.

Reference: Advisory committee on Immunization Practices: Prevention and Control of Influenza MMWR 46 (RR-9 suppl): 1 1997.



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