

Northwest Territories Certification of Immunization Competence Self-Directed Learning Module

Recertification Exam Questions

Revised November 2005



Northwest Territories Certification of Immunization Competence Self-Directed Learning Module_[H1]

Please answer ALL questions in the space provided. If additional space is needed, please write on the back making sure the answer is well indicated. Please be brief but complete with your answers. Your document will be returned to you with a copy kept in your personal file.

1.	What A. B. C. D.	is the only <u>true</u> contraindication for all vaccines? Anaphylactic reaction to a previous dose or a constituent of the vaccine Moderate or severe illness Fever Premature Infants
2.	What	is a possible reaction following the administration of a varicella vaccine?
	Α.	Orchitis
	В.	Disseminated adenopathy
	C.	Sore throat
	D.	Lesions occurring 5 to 26 days post vaccine
3.	Select	the combination of vaccines that are safe to give in pregnancy?
	Α.	MMR, Hepatitis B
	В.	Hepatitis B, Tetanus
	C.	Varicella, Hepatitis B
	D.	Tetanus, Varicella

4.	MMR i that ap	immunization is not recommended in the following circumstances; (check all oply);	
	Α.	Pregnancy	
	В.	Immunocompromised (medical assessment of immune status is necessary)	
	C.	Anaphylactic reaction to eggs or any component of the vaccine (such as, neomycin or gelatin) where an adequate facility is not available to manage anaphylaxis	
	D.	All of the above	
Check	() the	following True (T) or False (F):	
5.	When	a cold chain breach has occurred:	
	Α.	The regional Pharmacist or designate at the community level will notify the Health Protection UnitTF	
	В.	If it is known that the power outage will last less than two hours and there is no water in the fridge door, the vaccines can remain in the refrigerator; the	
	C	door should not be openedTF	
	C.	If due to a <u>witnessed</u> power outage, the regional Pharmacist or designate will take the vaccines out of the refrigerator and destroy themTF	
6.	-	monitor needs to be activated?	
	Α.	The Warm Mark [™] monitor	
	В.	The Cold Mark [™] monitor	
	C.	Both of the above	
	D.	None of the above	
7.	If there	e is no colour change, which monitor can you reuse?	
	A.	The Warm Mark TM monitor	
	д. В.	The Cold Mark [™] monitor	
	С.	Both of the above	
	D.	None of the above	
	υ.		

8.	When	do you read the monitors?	
	Α.	As soon as you have time	
	В.	Immediately upon arrival of vaccine	
	C.	Within an hour of arrival of vaccine	
	D.	Never, as it is self-alarmed	
9.	When	are non-reconstituted vaccines discarded? (select all right answers)	
_	Α.	The last day of the month of the expiry date	
	В.	According to the manufacturers instructions	
	C.	One month after the expiry date	
	D.	One month after opening	
10.	Why i	s it necessary to maintain the cold chain?	
	Α.	Keep the evidence intact	
	В.	Maintain potency of vaccines	
	C.	To keep the vials from breaking	
	D.	To keep the vaccine free from contamination	

11.		, a grade 9 student, has just received a TdaP booster. She states that she is g faint and is having difficulty breathing.	
	Check ($$) the following True (T) or False (F):		
	Α.	She could be experiencing an anaphylactic reaction. T F	
	В.	You should have her lie down and measure her BP, pulse and respirations. T F	
	C.	The correct dosage of adrenalin to administer in the case of anaphylaxis is 0.01 ml/kg to a maximum of 0.5 ml, if this is determined to be anaphylaxis. T F	
	D.	If adrenalin is administered, it should be given subcutaneously in all cases. T F	
	Ε.	Mona is likely experiencing a fainting spell but should be supervised	
		for 30 minutes to monitor for allergic reaction as a precaution. T	
		F	

12.	age, ł of He mothe	en is eight months old and is attending a Well Child Clinic. At six months of he received first dose of Pentacel, which contains DaPT-P/Hib, second dose p B, Pneumococcal (PCV-7) and Men C. Steven is being breastfed, and his er is two months pregnant and has not had Varicella (Chickenpox). He looks but is taking Amoxil.	
	Α.	What vaccines should be given to Steven today?	
		(a) DaPT, IPV, Hib, Hep B	
		(b) DaPT, OPV, Hib, Hep B	
		(c) DaPT, IPV, Hib, Pneumococcal (PCV-7)	
		(d) MMR, Hep B	
	В.	At what age should Steven return for his next immunization appointment?	
		(a) 12 months	
		(b) 9 months	
		(c) 10 months	
		(d) 15 months	
	C.	What vaccines should Steven receive then?	
		(a) MMR, Hep B	
		(b) DaPT/Hib, OPV	
		(c) DaPT-P	
		(d) DaPT-P/Hib, Hep B, Pneumococcal (PCV-7)	
	D.	What vaccines will Steven receive at 12 months of age?	
		(a) DaPT-P/Hib, Hep B	
		(b) MMR, Hep B	
		(c) DaPT, IPV, Hep B	
		(d) MMR, Varicella, Pneumococcal (PCV-7) and Men C	
	E.	What are the contraindications to Steven receiving his immunization today?	
		(a) On antibiotics	
		(b) Household member pregnant	
		(c) Being breastfed	
		(d) None of the above.	
	F.	What vaccines will Steven receive when he is in grade nine?	
		(a) TdaP	
		(b) Td-P	
		(c) Td-OPV	

13.	A preschool child has arrived at Preschool Screening Clinic having previously received a complete primary series of DaPT-P/Hib (in infancy). You are informed that the child is allergic to dust, cats and several foods. Identify the order in which you would gather the information in assessing for this overdue MMR vaccine?	
	A. Child can receive MMR at this time, if no history of anaphylaxis to eggs or any component of the vaccine	
	B. Determine if child has had an anaphylactic reaction to eggs	
	C. Assess nature and level of severity regarding the food allergy	
	D. An appointment for a second MMR should be given in 6 mos.	
	1 2 3 4	
14.	Katelyn is 18 months old, and is on renal dialysis and corticosteriods for severe nephrotic syndrome. She has previously received three doses of DaPT-P/Hib and two doses of Hep B at the recommended ages. She has not received MMR. When should she receive live vaccines?	
	A. When her immune status is stable.	
	B. Never	
	C. In eight weeks	
	D. Today	
15.	A child received MMR two days ago and requires a Mantoux test. What do you do and why?	
16.	Elizabeth is 2 months old and was born one month premature. She received her first dose of Hep B and BCG vaccine at birth. Mom is breastfeeding her, and her father completed radiation and chemotherapy for Hodgkins six months ago. Her sister has epilepsy.	
	A. Are there any contraindications?	
	(a) Yes, due to prematurity	
	(b) Yes, due to family history of epilepsy	
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		(c) Yes, due to family member receiving chemotherapy	
		(d) None of the above	
		(e) All of the above	
E	8.	What vaccines do Elizabeth need at this time?	
		(a) DaPT-P/Hib, Hep B, Pneumococcal (PCV-7) and Men C	
		(b) DaPT-P/Hib	
		(c) None until three months because she is one month premature	
		(d) Not until she weighs 4500 gms	
C).	When should she come back and what vaccines should she receive?	
		(a) In two months for DaPT-P/Hib and Pneumococcal (PCV-7)	
		(b) In two months for DaPT-P/Hib, Hep B	
		(c) In one month for Hep B	
		(d) None of the above	

17.		, Elizabeth's brother, is three year or his fourth dose of DaPT-P/Hib.	rs old and has no documentation of either			
	Α.	Are there any contraindications?				
		(a) No pertussis due to family hi	story of epilepsy			
		(b) No MMR due to family mem	ber receiving chemotherapy			
		(c) No contraindications				
	В.	What vaccines does Austin nee	cines does Austin need?			
		(a) DaPT-P/Hib				
		(b) MMR				
		(c) a and b				
		(d) DT-P, Hib				
	C.	When can he receive his last do	se of DaPT-P (Quadracel)?			
		(a) Twelve months later				
		(b) Twenty-four monthss later				
		(c) Thirty months later				
		(d) Any of the above				
18.	18. How do you read and record the results of a Mantoux Test? <i>Always use a ruler and record in millimetres.</i>					
	Α.	Read within 48 to 72 hours, and diameter.				
	В.	Read within 48 to 72 hours, and diameter.				
	C.	Read in 24 hours, and measure	induration at widest transverse diameter.			
	D.	Read in 24 hours, and measure	redness at widest transverse diameter.			
19.	How d	lo you interpret the Mantoux readi				
	Α.	Positive	1 . 0-4 mm			
	В.	Negative	2. 5-9 mm			
	C.	Doubtful	3. first Mantoux 0mm and over 65 years old			
	D.	Two-step Mantoux required	4. > 10 mm			
	A =_	B = C = D =	·			

20.		should be recommended to a 26-year-old woman who is not immune, and ot had a booster for rubella?	
	Α.	Give MMR and counsel to avoid pregnancy for 6 months	
	В.	Give Rubella vaccine and counsel to avoid pregnancy for 6 months	
	C.	Give MMR and counsel to avoid pregnancy for one month	
	D.	Give Rubella vaccine and counsel to avoid pregnancy for one month	
21.	Who	are the high-risk, target populations for influenza immunization?	
	Α.	Adults and children with chronic cardiac, pulmonary, metabolic and immunodeficiency disorders	
	В.	People of any age in Long Term Care Facilities	
	C.	People \geq 65 years of age, children under 2 yrs, and all health care workers	
	D.	All of the above	
22.	In the	NWT which groups are targeted for hepatitis B immunization?	
	Α.	Occupational risk, such as health care workers and first responders	
	В.	Persons having unprotected sex	
	C.	Persons who are Hepatitis C positive	
	D.	All newborns and preadolescents	
	E.	All of the above	
23.		mococcal (PCV-7) was introduced in the NWT January 2006. Who is eligible is vaccine? (Select all correct answers)	
	Α.	All school age children	
	В.	All infants born as of, on, or after January 2006.	
	C.	All children less than 18 months of age.	
	D.	All at risk children	
	Ε.	Children with chronic ear infections.	
24.		npin prophylaxis should be used to prevent further cases of which of the ring diseases:	
	A. R	ubella	
	В. Н	ib	
	С. М	lumps	
	D. H	epatitis B	
	E. N	one of the above	

25.	W/bot	are the adverse events that eccur when RCC is given subouteneously	
25.		are the adverse events that occur when BCG is given subcutaneously d of intradermally	
	A.	May cause abscess formation including bone abscess	
	В.	Lymph adenopathy	
	C.	Disseminated BCGitis	
	D.	All of the above	
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26.		are the absolute contraindications for BCG vaccine?	
	Α.	Altered immune status of the baby or household members, such as HIV	
	B.	Pregnancy	
	C.	Previous history of tuberculosis or BCG vaccination	
	D.	All of the above	
27.	•	e at continued high risk for rabies exposure, should have their titre monitored at timeframe.	
	Α.	Every 4 years	
	В.	Every 2 years	
	C.	Not at all	
	D.	Every year	
28.	A person has been bitten by an unvaccinated dog, which cannot be identified. Of the following, what statement does not pertain to a client who has had a pre-exposure series of Rabies vaccine?		
	Α.	Local treatment of wound	
	В.	Consult with environmental health officer	
	C.	Two doses of HDCV, one injected immediately and the other 3 days later	
	D.	Five doses of HDCV 1 ml, give on days 0,3, 7, 14 and 28 and administer RIG	
20	Anoia	ubt year old hav has just been identified as a banatitis P corrier, what	
29.		ht year old boy has just been identified as a hepatitis B carrier, what hold contacts require further hepatitis B immunization?	
	Α.	Mother who has been determined to be a hepatitis B carrier	
	В.	The father who has been determined to be $HBsAb^+$	
	C.	Brother born in 1996 who has been immunized Hepatitis B	
	D.	Sister born in 1984 and has not received Hepatitis B	

30.		to you determine if a person does not require varicella vaccine? (Select all oplicable answers).	
	Α.	Has a documented history of disease	
	В.	Verbal history of disease from patient or family member	
	C.	IgG positive for varicella	
	D.	All of the above	
31.		lose of Varicella vaccine is required up to 13 years of age, how many doses quired after 13 years of age:	
	Α.	One	
	В.	Тwo	
	C.	Three	
	D.	All of the Above	
32.	Beginning September 2004, Meningococcal C (Men-C) was at 2 and 4 months according to the NWT infant immunization schedule. October 2005 the NWT schedule was changed due to new evidence, it is now to be given at what ages.		
	Α.	0, 1, and 6 months	
	В.	2, 4, and 12 months	
	C.	2 and 12 months	
	D.	12 and 18 months	
33.	Men-0	C is a live vaccine?	
	Α.	True	
	В.	False	
34.	Men-0 vaccir	C and Pneumococcal (PCV-7) can be given with any live or attenuate ne?	
	Α.	True	
	В.	False	

Checklist for Supervised Immunization Experience

ΑCΤΙVITY		DATE MPLE		COMMENTS
Completed the Self Directed Learning Module				
Shared Appropriate Vaccine Information with Client				
Performed Appropriate Assessment Prior to Immunization				
Discussed Risks and Benefits				
Obtained Informed Consent				
 Prepared Vaccine Appropriately: vaccine selection; checked expiry date, dosage reconstitution choice of syringe, needle and site sterile/aseptic technique vaccine storage/ handling 				
Administrative Vaccine Appropriately:	IM	IM	IM	
 Positioning, holding IM SC Disposal of needle and syringe Comfort measures 	SC ID	SC ID	SC ID	
Demonstrated Appropriately: Client's Immunization Card Automated database				

Completion Date: _____

Signature: _____

CHN/PHN

Signature: _____

Evaluator
