


## **Teaching Immunization Delivery and Evaluation - TIDE**



Why study immunization  
delivery?

Perhaps it is best said by a quote ...

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**“The impact of vaccination on the health of the world’s people would be hard to exaggerate. With the exception of safe water, no other modality, not even antibiotics, has had such a major effect on mortality reduction and population growth.”**

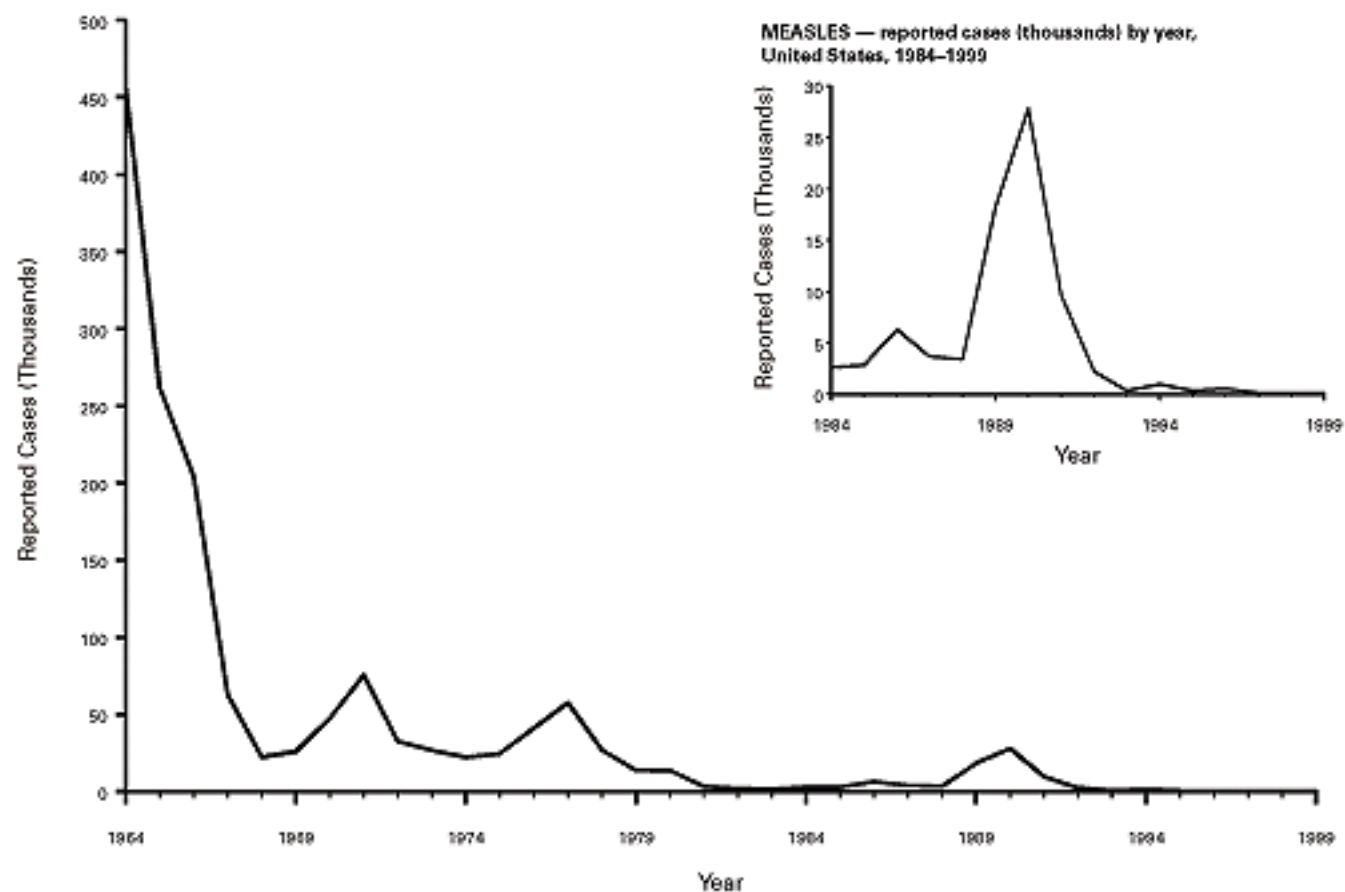
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... and shown by the following slide of  
measles incidence.

- Note the inset and remember that a year  
1990 objective was the eradication of  
measles ...

# MEASLES — reported cases (thousands) by year, United States, 1964–1999



Measles incidence remained at <1 case/1,000,000 population for the third consecutive year, with 100 cases reported in 1999. Of these cases, 66% were imported from outside the United States. Measles is not currently endemic in this country.

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How much difference has immunization made?

The next slide tries to put numbers to that question ...

# Annual morbidity for 9 vaccine preventable diseases

| Disease                              | Baseline 20th century annual morbidity | 1998 Provisional morbidity | % Decrease        |
|--------------------------------------|--|----------------------------|-------------------|
| Smallpox                             | 48,164 <sup>3</sup>                    | 0                          | 100%              |
| Diphtheria                           | 175,885 <sup>1</sup>                   | 1                          | 100% <sup>4</sup> |
| Pertussis                            | 147,271 <sup>5</sup>                   | 6,279                      | 95.7%             |
| Tetanus                              | 1,316 <sup>4,6</sup>                   | 34                         | 97.4%             |
| Poliomylitis (paralytic)             | 16,316 <sup>11</sup>                   | 0 <sup>12</sup>            | 100%              |
| Measles                              | 503,282 <sup>7,8</sup>                 | 89                         | 100% <sup>5</sup> |
| Mumps                                | 152,209 <sup>9,10</sup>                | 606                        | 99.6%             |
| Rubella                              | 47,745 <sup>11</sup>                   | 345                        | 99.3%             |
| <i>Congenital rubella syndrome</i>   | 823 <sup>13,14</sup>                   | 5                          | 99.4%             |
| <i>Haemophilus influenzae type b</i> | 20,000 <sup>15,16</sup>                | 54 <sup>17,18</sup>        | 99.7%             |

Table 2, MMWR April 02, 1999 / 48(12);245

## TEACHING IMMUNIZATION DELIVERY AND EVALUATION



### VACCINE SAFETY

NEW!

Discover tools to help you explain vaccine risk & benefit to parents.



### CHILDHOOD IMMUNIZATIONS

Test your knowledge of the timing of childhood immunizations.



### ADOLESCENT IMMUNIZATIONS

Check your understanding of adolescent immunization by reviewing these cases.



### HEALTH CARE PERSONNEL IMMUNIZATIONS

NEW!

Find out what vaccines are recommended for you and your staff.



### STORAGE, HANDLING, & ADMINISTRATION

Protect your (expensive, fragile) vaccine. Treat it right.



### MEASURE IMMUNIZATION RATES

Assess rates and review records to diagnose and treat problems in office delivery of immunization.



### IMPROVE IMMUNIZATION RATES

Negotiate and implement system changes for effective immunization delivery.



### IMMUNIZATION QUALITY IMPROVEMENT

Requires additional login.



NEW!

See the new [TIDE Vaccine Safety Module!](#) This module is designed to help you explain the dangers of vaccine-preventable diseases and the effectiveness of vaccines against them, as well as answering parents' common vaccine safety questions.

**TIDE** is a group of highly interactive, case-based modules. It's designed to help clinicians learn to store, give, and communicate about immunizations with technical excellence.

Why study vaccine delivery? It's worth doing; it's worth doing excellently.

**What is a TIDE module?** Each module (list shown left) covers an aspect of immunization delivery. They're flexible: Stop and start. Work on them alone or in groups as part of an in-service.

**Why register?** If you register, you can stop, save your work, and then log in and pick up where you left off. It also allows you to obtain a CE certificate.

**CE is available at no charge.** To get CE, you must register and then log in.

Browse mode allows you to see a sample module.

**Who created TIDE?** [Meet our Authors and Board of Directors.](#)

[Contact us](#) to tell us what you think or need.

### Poll of the Week

How much do you think physicians should learn about vaccine storage?

- None, others should be in charge
- A little, enough to check
- A lot, ultimately, their responsibility
- Other

Submit

### TIDE Blog

**Flu Vaccine** ([All Topic Posts](#))  
2012-2013 Flu Season [Read More](#)  
2011-2012 Influenza recommendations [Read More](#)

**Childhood Immunizations** ([All Topic Posts](#))  
Vaccination Coverage in Kindergarten, 2011-2012 [Read More](#)  
Pertussis [Read More](#)

**Vaccine "controversies"** ([All Topic Posts](#))  
The anti-vaccine world view [Read More](#)  
Purpose of this blog-set [Read More](#)



ACADEMIC  
PEDIATRIC  
ASSOCIATION

Leadership in education, research, patient care, and advocacy

The TIDE modules were created with grants from the Centers for Disease Control and Prevention (CDC) National Immunization Program and the American Pediatric Association. Ongoing maintenance of the TIDE modules is provided by the Medical University of South Carolina.