

WRHA Travel Health & Tropical Medicine Services Deliverables for the Manitoba Travel Health Network

Annual Report April 1, 2018 To March 31, 2019





Table of Contents

Manitoba Travel Health Network Annual Report: April 1, 2018 - March 31, 2019

Appendix 1 – Manitoba Travel Health Network Deliverables

Appendix 2 - Manitoba TH Network Distribution of Members

Appendix 3 – Number of Incoming and Outgoing HCPs to TH Network

Appendix 4 - Number of TH network Members Who Decline Group Email

Appendix 5 – Number of TH Network Members Registered for TH Manual & Group Email

Appendix 6 – Professional Distribution of HCPs Belonging to the Manitoba TH Network

Appendix 7 - Manitoba TH Network Meeting Agenda

Appendix 8 – Manitoba 15th Annual TH Conference Summary

Appendix 9 - Manitoba Directory of TH Services

Appendix 10 – Distribution of Phone Calls to the WRHA Information Line for Health Professionals

Appendix 11 – Annual Number of Phone Calls to WRHA Information Line for Health Professionals

Appendix 12 – Percentage of Phone Calls to WRHA Information Line for Health Professionals

Appendix 13 – Percentage of Phone Calls by Region to WRHA Information Line for Health Professionals

Appendix 14 – Information Line for Health Professionals Types of Calls

Appendix 15 – Information Line for Health Professionals Destinations for Call Queries

Appendix 16 – Annual Yearly Visits to WRHA Travel Health Website

Appendix 17 – Number of Individual Hits to WRHA Travel Health Website

Appendix 18 – Comparison of Annual Monthly Visits to WRHA Travel Health Website Last 3 Years

Appendix 19 – Number of Monthly Visits and Referrals Away from Clinic

Appendix 20 - Number of Vacant Shifts Versus Number of Shifts Picked up by Casuals

Appendix 21 – Algorithm for Scheduling Callers during PHN Shortage

Appendix 22 –WRHA Travel Health & Tropical Medicine Services Annual Stats

Appendix 23 – Breakdown of Pre-Travel Health Visits

Appendix 24 – Annual Pre-travel Health Visits to WRHA Travel Health Clinic

Appendix 25 – New Visit Type Comparison by Percentage

Appendix 26 – Number of New Family Visits

Appendix 27 – Number of Other New Visits

Appendix 28 – Referral Source for Client

Appendix 29 - Accommodation

Appendix 30 – Purpose of Travel

Appendix 31 – Destinations of WRHA Travel Health & Tropical Medicine Services Clients

Appendix 32 – Destination Comparison by Year

Appendix 33 – Antimalarial Medication

Appendix 34 – Percentage of Communicable Diseases Related to Travel in Winnipeg Region

Appendix 35 – WRHA Travel Health Clinic Revenue

Appendix 36 – WRHA Travel Health Fees

Report prepared by Jacquie Shackel RN, BN, Travel Health Coordinator, WRHA Travel Health & Tropical Medicine Services, Certificate in Travel Health™. Please forward any questions or comments regarding the contents of this report to Jacquie at 204-940-2538 or by way of email at jshackel@wrha.mb.ca



Manitoba Travel Health Network Annual Report: April 1, 2018 – March 31, 2019

Winnipeg Regional Health Authority (WRHA) Travel Health & Tropical Medicine Services is a clinic-based, centralized public health program that functions as a cost recovery clinic, with experienced public health nurses (PHNs) providing pre-travel health services, and specialized physicians offering post travel and tropical medicine services. In addition to operating as a clinic, staff has continued to provide leadership to the Manitoba Travel Health (TH) Network since its inception in 2001, through meeting the predetermined deliverables (*Appendix 1*), as well as delivering comprehensive services to the Provincial Rabies Pre-exposure Prophylaxis (PEP) Occupational Health Program since July 2013. The rabies program is a publicly funded, centrally managed and occupationally focused program, for pre-exposure rabies immunization and serology management for eligible at-risk individuals. Although both of these publicly funded programs are delivered within the structure of WRHA Travel Health & Tropical Medicine Services, the clinic in itself generates its own sustainable revenue.

The two main goals of the Manitoba TH Network are to:

- Support Manitoba Practitioners in the maintenance of the provincial guidelines for travel health services.
- Provide consistent, competent and comprehensive travel health services to Manitobans.

The TH Network is in its 19th year of operation and currently has 288 provincial health care providers (HCP) enrolled, with 197 from the Winnipeg/Churchill Region (68.4%) and 91 members (31.6%) from other Regional Health Authorities (RHAs) (*Appendix 2*). Forty new members were registered this past fiscal year while 26 left the TH Network, due to changing jobs or retirements (*Appendix 3*).

By being enrolled with the TH Network, providers have access to the password-protected on-line Manitoba Travel Health Manual for Health Professionals, which is updated regularly, as well as receiving group emails, which provide regular updates on various changes in travel related recommendations or practices, as well as outbreak information:

- The manual received a total of 528 updates this past year, with the majority focused on country-specific updates, where embedded hyperlinks were added for diseases such as zika, schistosomiasis, Japanese encephalitis and polio in addition to direct country-specific links to the Public Health Agency of Canada (PHAC). These additions allow for easier navigation and a more timely way to identify country specific risks for HCPs. In addition, there were several updates for various vaccine biological pages and fact sheets, to reflect changes in practice and/or recommendations. Many updates occurred as a result of ongoing epidemiological changes to yellow fever, polio, meningococcal meningitis and Japanese encephalitis. The username and password for access to the manual is changed routinely and disseminated to all registered members, to monitor and ensure accuracy of the user list. This was last completed on Sept 17, 2018.
- Twenty-nine of the 288 individual providers have chosen not to partake in the group email updates, with majority being from the Winnipeg/Churchill Region (*Appendix 4 & 5*). This translates into 90% of registered providers receiving these updates on a regular basis.
- Majority of the TH Network members are either Registered Nurses (RNs) or Physicians, although there is an increasing representation from Pharmacists and Nurse Practitioners, in addition to Physician Assistants as well as other professions (*Appendix 6*).
- Eighty-five group emails were disseminated to the provincial TH Network members this past year.

In addition to these regular electronic updates, the provincial TH Network typically connects once a year in April to discuss current and relevant issues in travel health. The group met on April 26, 2018; the attached agenda was reviewed (*Appendix 7*) and minutes disseminated to the Network at-large. Of the total number of registered members to the Network, core members have consistently attended these meetings, mainly from public health and other specialized travel health clinics or pharmacies. On April 26, 2018, there were 25 regular members in attendance.

The Manitoba 15th Annual Travel Health Conference was held on April 26 & 27, 2018 with 78 HCPs in attendance. The theme of the conference was "On the Cutting Edge...Now & in the Future" and was well received. Networking opportunities existed with 81% of the conference attendees being from within the province of Manitoba. There were a total of 49 sponsors and supporters contributing their time and resources to make this conference a success. For a summary of the conference please review *Appendix 8*.

The Manitoba Directory of Travel Health Services was updated and shared with Health Links/Info Santé, as well as Manitoba Government Inquiries, three times throughout the year (*Appendix 9*). As of March 31, 2019, Manitoba listed 18 specialized TH clinics, with 5 being located within the city of Winnipeg, and the other 13 dispersed across the province. They consist of a combination of 7 public health clinics and 11 privately-operated clinics, with 5 offering service through a pharmacy location in a collaborative practice with their local physicians. Two specialized Public Health travel clinics within Southern Health–Santé Sud closed this fiscal year. Ten of the provincial TH Clinics are designated as Yellow Fever Vaccination Centres through the Public Health Agency of Canada (PHAC); however due to a national yellow fever vaccine shortage since 2016, the 4 newest designated clinics have not yet been able to secure or provide the yellow fever vaccine.

As part of the deliverables, the TH Network also offers educational opportunities for HCPs at WRHA Travel Health & Tropical Medicine Services, by providing dedicated time for shadow and elective experiences, whereby providers can work alongside staff, gaining insight into the practice of travel health. Fourteen HCPs, received such opportunities this past year, with a total of 10 ½ days in pre-travel and 12 ½ days in the post travel clinic. Of these opportunities, the clinic staff mentored 4 medical residents, 1 Fellow, 4 med students and 5 nurses. Due to a PHN staff shortage in the pre-travel health clinic, limited opportunities were available at certain times throughout the year.

The Information Line for Health Professionals received a total of 269 calls this fiscal year, an average of 22 calls per month, and for the first time ever, the majority (46%) coming from physicians, followed by 41% nurses, 9% pharmacists and 4% from clients or other providers (*Appendix 10*). Historically, the majority of calls have been initiated by nurses. The volume of calls has been relatively consistent over the past ten years, with an expected higher volume of calls in the first few years of inception (*Appendix 11*). The peaks in calls follow the typical higher travel volume season from fall until spring, as noted in *Appendix 12*. Of the total number of calls, 82% originate from the Winnipeg/Churchill Region, with the others coming from outside the city (*Appendix 13*). On examination of the types of calls coming in to the phone line, the majority (43%) are for country specific information, followed by vaccine schedules (21%) and then vaccine shortages (*Appendix 14*). When looking at the destinations of the incoming calls from the phone line (*Appendix 15*), they typically follow a similar pattern to the destinations for travellers that are seen in the WRHA Travel Health Clinic, although this past year, more calls were received for Mexico, Central America and the Caribbean, than what was seen in the clinic, as a result of the clinic having to prioritize other higher risk destinations, and referring these destinations to other providers.



The WRHA Travel Health webpage has seen a stabilization of "hits" to the website over the past 3 years, from the previous 4-year spike between 2012 and 2015, with 42,364 hits to the site this past year, compared to 39, 720 from the previous year and the all-time high of 61,367 in 2013 (*Appendix 16*). The monthly demand has shown consistency from year to year, with highest volumes between October and January (*Appendix 17*), and overall increased usage between October to March (*Appendix 18*).

WRHA Travel Health & Tropical Medicine Services was asked to include a promotional letter in the Canadian Mennonite University's (CMU) "Outatown" handbook in January 2019 as well as to partner with Carlson Wagonlit Travel Agency on two separate occasions (Fall 2018 and early winter 2019) with an information letter to their respective travelling groups. We also collaborated with two separate high school groups who were planning travel to higher risk destinations in Africa, by offering information letters to parents. The newly created WRHA Healthy Parenting Website, now features information about travel health & vaccinations and has included direct links to the website for WRHA Travel Health & Tropical Medicine Services.

Since June 2015, the WRHA TH Clinic has been participating in an ongoing long-term research study, conducted by researchers through the University of Manitoba, describing "The Effect of First Time versus Experienced Travel to South Asia on Acquiring Extended Spectrum Beta-Lactamase-Producing Enterobacteriaceae (ESBL-PE): A Prospective Cohort Study". This study was extended to December 2018, to ensure the estimated sample size of approximately 360 individuals who were 16 years of age and older with planned travel to at least one of nine countries within South Asia, was achieved. A report of the study is pending.

Management of a prolonged national yellow fever (YF) vaccine shortage over a three year period of time has been challenging, both at a clinic and at a provincial level. The shortage began in November 2016, and is currently anticipated to last until the last quarter of 2019. YF vaccine availability had been sparse, necessitating the development of provincial guidelines by the TH Network to address the shortage and ensuring consistency in the delivery of YF vaccinations to travellers across the province. HCPs have worked collaboratively and effectively, utilizing approved algorithms, dependent on volume of vaccine available within the province at any given time. In addition, the national interim yellow fever fractional dosing (YF-FD) guidelines developed by the Committee to Advise on Tropical Medicine and Travel (CATMAT) were adopted and implemented within the province. The two travel health clinics that have the largest volumes of travellers (WRHA and Prairie Mountain) were designated as the sites to offer YF-FD and the remaining YF designated clinics referred travellers to these clinics as needed. Redistribution of available YF vaccine throughout the province during this prolonged national YF vaccine shortage was to ensure maximum optimization of available supply.

The introduction of the Regulated Health Professions Act (RHPA) on May 31, 2018 resulted in significant staffing challenges at the WRHA TH Clinic. An absence of PHNs within the province of Manitoba who are educated with the RN Authorized Prescriber (AP) designation made it impossible to fill vacant positions and resulted in the WRHA TH Clinic operating at 28% capacity of permanent EFT. Employment of casual PHNs who met the legislated criteria to practice, resulted in filling only 25% of the 344 vacant shifts (*Appendix 19*). The number of referrals away from the clinic increased to a record high of 2,891 for the full year, peaking from Oct to Jan (*Appendix 20*). In order to ensure that travellers with the greatest risk were seen at the clinic, guidelines for triaging incoming referrals were developed. Those at highest risk were prioritized and all lower risk travellers were referred elsewhere. (*Appendix 21*). The clinic therefore



predominantly saw travellers needing yellow fever (YF) vaccine and those travelling to higher risk malaria areas. Destinations where YF or malaria were not indicated or were low risk, were referred away. Communication to our various partners was developed and disseminated, along with a list or other providers posted on our website.

The Manitoba TH Network Annual Services Activity Report is tabled in *Appendix 22* with several highlights to mention:

- In the WRHA TH Clinic, nursing and physician staff saw a total of 3294 new clients with a total of 4687 client visits (new and return visits together) in this reporting year; a significant decline from last year due to staffing challenges.
- The PHNs saw a total of 4479 client visits, the majority being pre-travel health clients (93.2%) with the remainder presenting as rabies occupational health clients or student/employment visits (*Appendix 23*). For the purposes of this report, we will classify the combination of these visit types as pre-travel, as they are being offered by the PHNs, versus post travel visits that are completed by the physicians.
- The trend over the last 7 years shows a decrease in the total number of pre-travel visits due to staffing challenges mentioned earlier (*Appendix 24*). "New" visits are categorized as either A, B or C, meaning less complicated to more complex in nature. For example, "A" visits are the routine resort travel, while "B" visits are for destinations with malaria and/or YF but with less complicated itineraries and "C" visits are for more complicated western African itineraries. Sixty six percent of visits are predominantly noted as "B" visits (*Appendix 25*), which is fairly typical every year. However, there was a marked drop in "A" visits from 20% last year to only 7% this year, with an increase in "C" visits from 17% to 27%, which is a result of the implemented risk stratification for managing incoming referrals.
- The pre-travel clinic saw a total of 52 family visits, with the majority (54%) being the New "B" visits (*Appendix 26*). In comparison, last year the clinic saw over double the amount of families, with a total of 123, and "B" visits were the majority at 56%.
- It was not unexpected that another outcome of our risk stratification for managing incoming referrals, identified a shift in the types of "Other" New Visits seen in the clinic, with YF-FD continuing to be the predominant "Other" new visit type, followed by YF Only visits, as the clinic was referring away other types of new visits (*Appendix 27*).
- Since July 13, 2017, the clinic has had the ability to capture the number of pre-travel visits offered in French, and 25 such visits noted to have occurred.
- The top 5 referral sources for clients to the WRHA TH clinic are fairly consistent from previous years with those being from friends and family (28.5%), previous clients (22.5%), another HCP (21.1%), the internet (14.3%) and the WRHA website (4.5%) (*Appendix 28*).
- The average length of time between their first visit to the clinic and their date of departure is 39.6 days, with the average duration of a trip being 31.9 days.
- The majority of travellers use hotels as their main type of accommodation (52%), with 21% and 12% respectively, staying with local family and friends or in hostels (*Appendix 29*).
- Fifty four percent of clients travel for the sole purpose of being a tourist, while 20.7% travel to visit friends and relatives and 13.5% travel for the purpose of working abroad (*Appendix 30*).
- The top 5 destination for our travellers comprised of East Africa (22%), followed by Tropical South America (20%), South Asia (11%), Southeast Asia (9%) and Southern Africa 7%) (*Appendix 31*). If we compare this to previous years, again as a result of our risk stratification for managing

- incoming referrals, we are seeing visits to Mexico/Central America and the Caribbean lower down the queue, whereas they would have normally been in our top 5 destinations (*Appendix 32*).
- Overall, 6087 vaccinations were provided at the clinic, including both funded and non-funded vaccines, with an overall 26.5% refusal rate, showing that most publicly funded vaccines were highly accepted, while the more costly travel specific vaccines were more likely declined, with the exception of yellow fever vaccine, only showing 13.6% of travellers declining. Two of the more costly travel vaccines, Japanese encephalitis and quadravalent meningococcal vaccine had a refusal rate of 70.4% and 51.6% respectively.
- For malaria chemoprophylaxis, 2142 prescriptions were provided to travellers, comprising 50% for atovaquone/proguanil, followed by 41% for doxycycline, 8% for mefloquine and 0% for chloroquine (*Appendix 33*). The lower numbers for chloroquine can be attributed to the clinic not seeing clients to these lower risk malaria areas. Of all the malaria prescriptions recommended, only 3.6% of travellers declined malaria chemoprophylaxis.
- In the promotion of personal protective measure for travellers, the clinic sold 249 units of insect repellent and 68 insecticide treated bed nets.
- This past year alone, there were a total of 10 cases of malaria reported within the Winnipeg Region, all attributed to travel, while only 80% and 78% respectively of typhoid fever and Hepatitis A cases, were documented as being related to travel. Other travel related communicable diseases for Winnipeg region can be identified in *Appendix 34*.

The overall breakdown of clinic revenue is seen in *Appendix 35*. This illustrates that 61% of the clinic revenue is directly related to clinic returns, while the remaining 39% is through provincially funded deliverable programs:

- Manitoba Travel Health (TH) Network (35%)
- Cost per dose funding for publicly funded vaccinations (1%)
- Provincial Rabies Pre-exposure Prophylaxis (PEP) Occupational Health Program (3%)

The clinic expenses are noted below:

| Nursing Salaries & Benefits | \$372,447 |
|---|-----------|
| Physician Salaries & Benefits | 0 |
| Clerical Salaries & Benefits | \$223,752 |
| Office Supplies (stationary etc) | \$2,748 |
| Medical Supplies & Vaccines | \$218,048 |
| Overhead (rent, interact, phones, software fees, computers etc) | \$42,388 |

The clinic fees and vaccine prices have remained static this past year, with no price increases (*Appendix 36*).



Manitoba Travel Health Network Deliverables

<u>History of Manitoba Travel Health Network</u> Deliverable Agreements:

- Term of Initial Agreement: October 2001 March 2003 \$95,000 annual funding x 2 years
- Term of Second Agreement: April 1, 2003- March 31, 2006 \$75,000 annual funding x 3 years
- ➤ Term (with no official agreement): April 1, 2006- March 31, 2007 \$75,000 annual funding x 1 year
- ➤ Term (with no official agreement): April 1, 2007- March 31, 2008 \$80,000 annual funding x 1 year
- > Term of Current & Ongoing agreement: April 1, 2008 ongoing baseline funding

Manitoba Travel Health Network Deliverable Goals:

- 1. To continue to support Manitoba Practitioners in the Maintenance of the provincial guidelines for travel health services
- 2. To provide consistent, competent and comprehensive travel health services to Manitobans

1. Maintain and Update the travel health services policy manual which addresses:

- The services that should be available from health care professionals providing travel health services
- The minimum level of education, experience and continuing education necessary for health care professionals to provide travel health services
- The appropriate practices and basic information with respect to pre-travel health advice, travel immunizations (needs assessment, brand, route of administration, timing, routine and accelerated schedules, etc.), anti-malarial prophylaxis and other relevant topics

2. Maintain and expand the Manitoba Travel Health Services Network

- Formal linkages will be made and maintained with private travel health providers to share information to support having consistent advice and services provided across Manitoba
- An established travel network will continue to have representation from each RHA for information

3. Information Sharing and Distribution

- Provision of appropriate and timely (within 1 working day) advice to physicians and nurses in Manitoba with travel related queries concerning immunization, anti-malarial prophylaxis, pre-travel counselling, etc.
- Provision of up-to-date, accurate fact sheets with appropriate literacy level on travel health topics including travel vaccines, anti-malarial medications, pre-travel advice, etc., to health care professionals working in travel health. Production, translating,



- printing, and distribution will be provided through the CDC Unit, Public Health branch. Manitoba Health
- Provision of a once annual travel health educational session for travel health professionals to address new advances
- Creation and maintenance of a Manitoba travel health information website. This will allow the Regional Health Authorities electronic access to a reliable, frequently updated (e.g. monthly) source of travel health information

4. Triage Calls for People Calling from Other RHAs to Travel Services within their RHA.

- Maintenance of an inventory of RHA and private travel service providers within Manitoba
- Referrals for clients to these services

5. Promotion of Travel Health Services

• Continue promotion efforts related to the importance and availability of pre-travel health services to the travel industry and the general public at least once per year

6. Provision of Educational Opportunities for Health Care Professionals

 Provision of educational opportunities for Nursing students, Medical students, Community Medicine students and Infectious Disease residents

7. Participation in Research Opportunities

• Participate where opportunities present in travel or tropical medicine research

8. Provision of Annual Report to Manitoba Health

- Annual reports will be provided to Manitoba Health
- The report will be sent to the Director of the Public Health Branch reporting on agreed upon deliverables

9. WRHA Travel Health Services Report

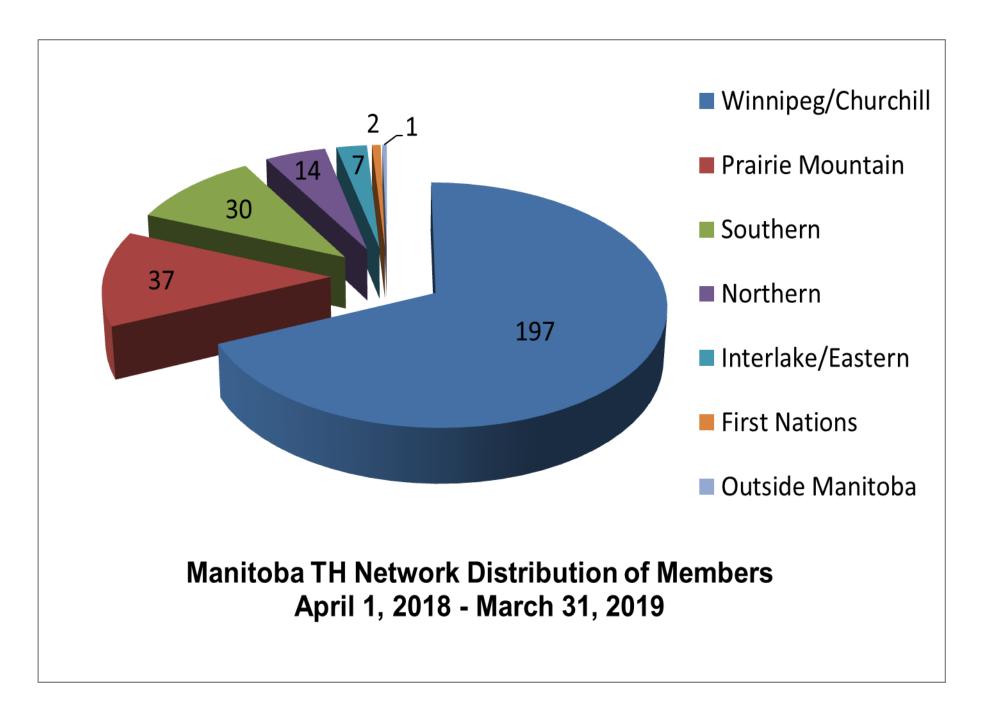
The report that will capture the services provided by the WRHA will include but not be limited to the following factors.

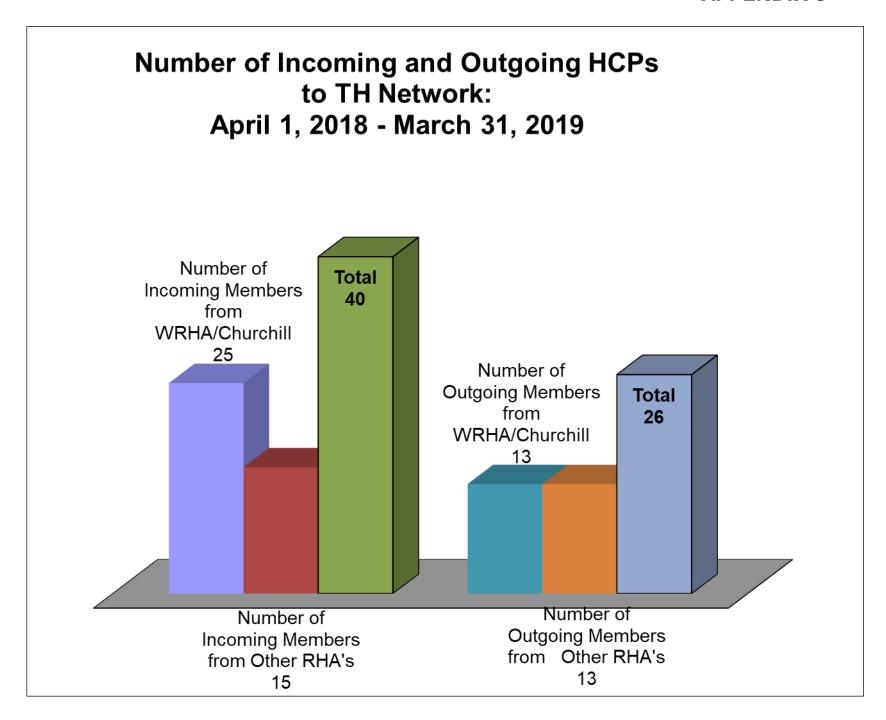
- Volume of services:
 - Number of travel health visits
 - Number of travellers served
 - Number and type of travel immunizations provided (should also be recorded in MIMS)
 - Number and source of consultations with the WRHA clinic
 - Summary of information sharing, promotional and education/research activities

• Costs:

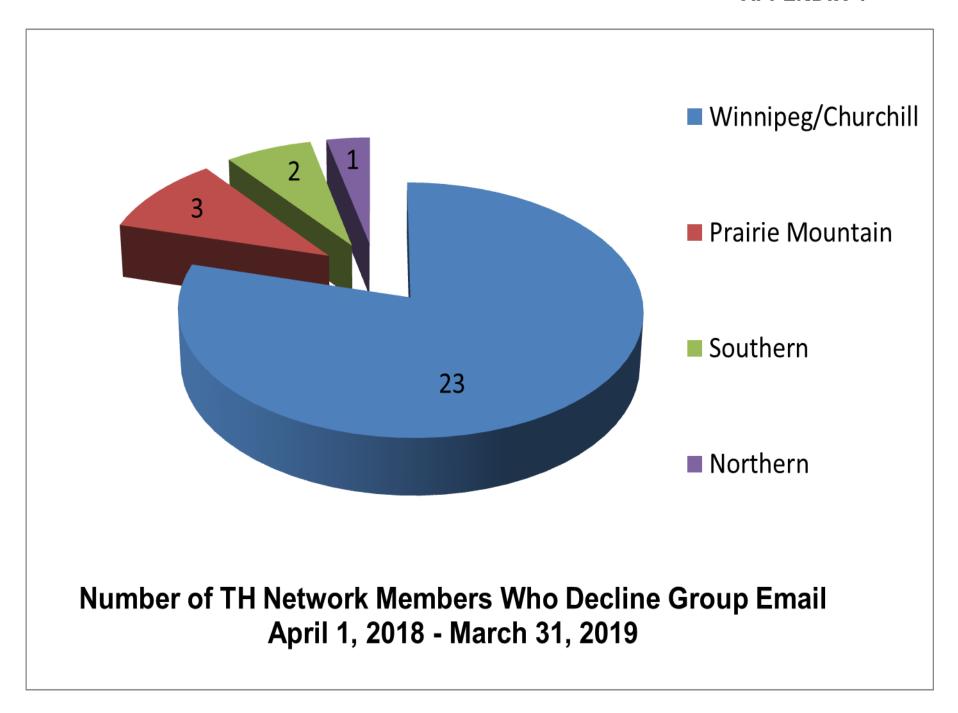
- Average cost borne by WRHA per clinic visit with subdivision according to supplies, nursing time, physician time, clerical & overhead
- Cost charged by RHA per clinic visit
- Individual and total cost of all travel vaccines purchased by RHA

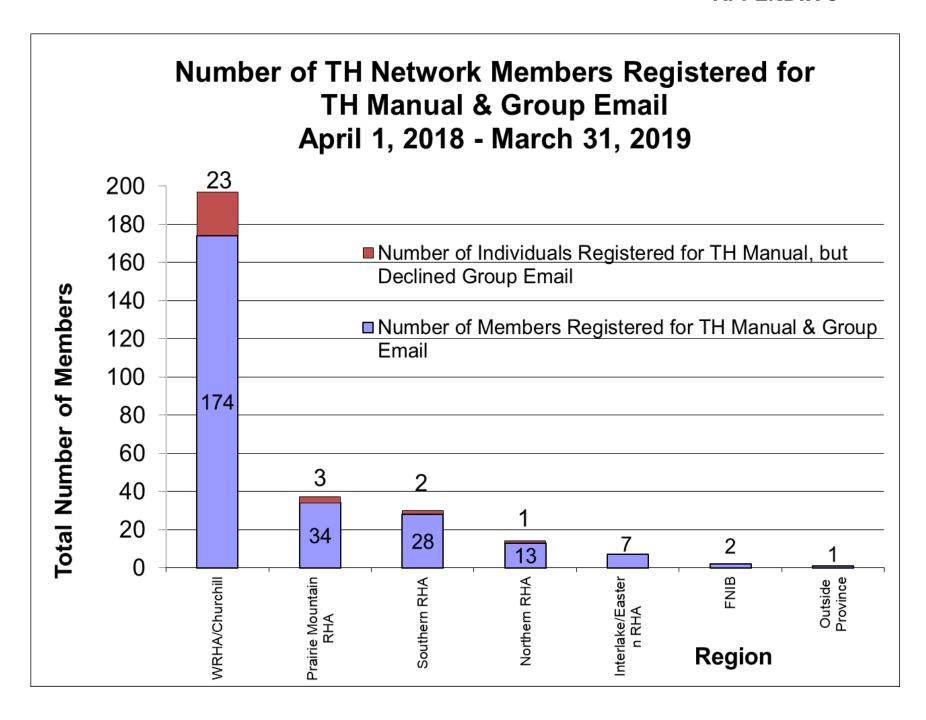
APPENDIX 2



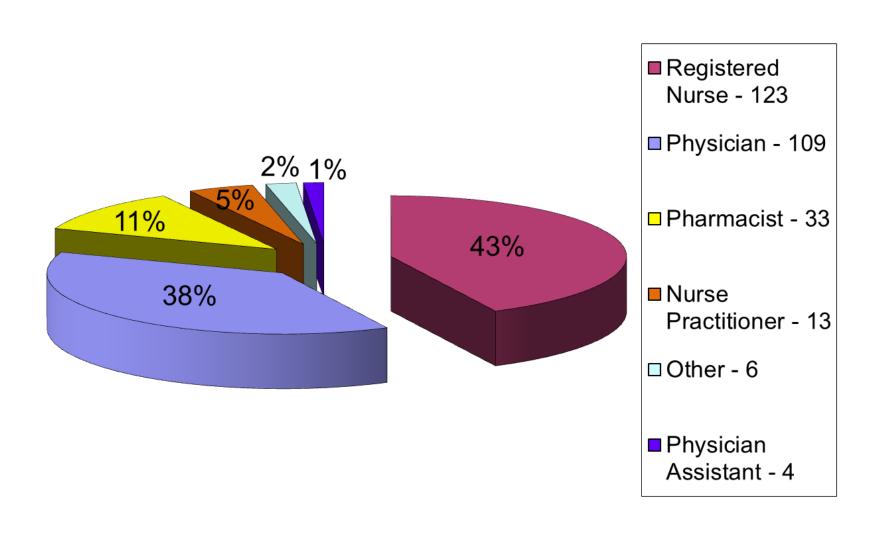


APPENDIX 4





Professional Distribution of HCPs Belonging to the Manitoba TH Network April 1, 2018 - March 31, 2019



Agenda

Manitoba Travel Health Network Meeting April 26, 2018

5:00 pm – **6:30 pm** (*Dinner will be served at 5:30 pm)

Viscount Gort Hotel (Lodge A)

- 1. Welcome & Introductions Site check-in for attendance (5 minutes)
 - ➤ Acknowledge new TH Network members
 - > Staff Retirements
- 2. Review of Previous Minutes (5 minutes)
- 3. Manitoba Travel Health (TH) Network Update Jacquie Shackel (30 minutes)
 - ➤ Manitoba TH Network Deliverables
 - > Frequently asked questions to phone line
 - > Yellow Fever Clinics in Manitoba
 - > YF vaccine shortage & fractional dosing process
- **4. ISTM Exam** (5 minutes)
 - ➤ Dates & locations
- **5. RN (AP) Update** (5 minutes)
- **6. Round Table Discussion** (30 minutes)
 - ➤ What is happening around the Province?
 - ➤ Mini grand rounds (interesting cases)
- 7. Planning for Manitoba 16th Annual Travel Health Conference (10 minutes)
- 8. Question & Answer

(5 minutes)

9. Next Meeting: April 2019



APPENDIX 8

On April 26 & 27, 2018 at the Viscount Gort Hotel, 78 health care providers attended the Manitoba 15th Annual Travel Health Conference hosted by the Winnipeg Regional Health Authority (WRHA) Travel Health & Tropical Medicine Services, in collaboration with Manitoba Health, Seniors & Active Living. The theme of this year's conference was "On the Cutting Edge...Now & in the Future".

Jacquie Shackel, Travel Health Coordinator for WRHA Travel Health & Tropical Medicine Services, facilitated the two day conference while Dr. Pierre Plourde, Medical Director for WRHA Travel Health & Tropical Medicine Services, moderated the presentations by introducing the various speakers and managing the Q & A component.

As facilitator for the conference and representative from the WRHA, we acknowledged that "WRHA provides health services in facilities located on the original lands of Treaty 1 and on the homelands of the Metis Nation. WRHA respects that the First Nation treaties were made on these territories and acknowledge the harms and mistakes of the past, and we dedicate ourselves to collaborate in partnership with First Nation, Metis and Inuit people in the spirit of reconciliation".

Carolyn Perchuk, WRHA Director of Population & Public Health provided the formal welcome & opening remarks for the conference.

Great networking opportunities took place as 81% of the conference attendees were from within the province of Manitoba, which meant that 19% of our guests come from outside of the province. We had delegates from as far west as BC, as north as Nunavut, and as far east as Quebec. Conference participants ranged from 43% being nurses, 18% pharmacists, 18% physicians, 4% Medical Tech's, 1% nurse practitioners, 1% students, and 19% being of the "other" category, which mostly consisted of sponsors or individuals with no professional classification listed.

According to our evaluation forms, delegates ranged in professional classification, mainly working in the areas of Public Health and Travel Health, but also specializing in areas such as Pharmacy, Primary care, Family Practice and Occupational Health. Based on comments from the conference evaluation forms and verbal feedback that we received, our goal of providing a forum of information exchange among health professionals in the field of Travel Health was very much a success! Participants shared both positive feedback and valuable information to better assist us with planning for next year's conference.

A total of 49 sponsors and supporters contributed their time and resources to make this year's conference a success. We would like to offer a very special "*Thank You*" to our two conference "Gold Sponsors", **Pfizer Vaccines** and **Valneva Canada Inc.**, as well as our "Silver Sponsor" **Sanofi Pasteur**. Their ongoing support to the efforts of our annual conference is remarkable! We were pleased to host 8 exhibits, which were all well attended by the delegates during the break times.







APPENDIX 8

Our Exhibitors included:

- 1. Pfizer Vaccines Gold Sponsor
- 2. Valneva Canada Inc. Gold Sponsor
- 3. Taché Pharmacy
- 4. EMAS Canada
- 5. Resource Centre for Manitobans who are Deaf Blind
- 6. Munroe Pharmacy
- 7. Sanofi Pasteur Silver Sponsor
- 8. Global MediKit

This year we are very pleased to note that we once again, met the accreditation criteria for:

- College of Pharmacists of Manitoba: This program has been accredited for a maximum of 9.25 CEU by the College of Pharmacists of Manitoba for pharmacists in Manitoba. (CPhM File No. 18011M).
- Attendance by **Registered Nurses and Nurse Practitioners**, may contribute to fulfillment of their continuing competence program self-development plan.

There were a wide range of topics this year, mainly focusing on pre-travel preparation, which incorporated a broad scope of the ISTM Body of Knowledge. Speakers were of national and provincial acclaim, with representation at a national level from the Committee to Advise on Tropical Medicine & Travel (CATMAT) and Air Canada. We also had provincial representation from Manitoba Health, Seniors and Active Living (MHSAL) as well as regional speakers representing the Winnipeg Regional Health Authority and other private agencies.

We received a 51% response rate on the evaluation forms and based on these comments, participants rated the speaker presentations on a scale of 1 to 4, with 1 being "strongly disagree" and 4 being "strongly agree" in three areas:

Presentation was consistent with the stated objectives: ranged from 3.08 to 3.97, with an average of 3.73

Information was clearly presented: ranged from 2.65 to 3.92, with an average of 3.63 Presentation was balanced and unbiased: ranged from 2.87 to 3.92, with an average of 3.66 Provided information which will influence my practice: ranged from 1.82 to 3.70, with an average of 3.24







APPENDIX 8

Invited speakers and their topics were as follows:

- Dr Yen Bui, member of the Committee to Advise on Tropical Medicine and Travel (CATMAT) with the Public Health Agency of Canada, as well as a Public Health Director for Montérégie, Québec, provided a "CATMAT Update" as well as exchanged information regarding "YF Boosters, YF vaccine Shortage and Fractional Dosing Guidelines".
- Tr Jim Chung, Chief Medical Officer with the Air Canada Medical Department, engaged the audience with an interesting overview of "Inflight Medical Emergencies and How to Optimize your Patient for Safe Travel".
- Dr. Paul Van Caeseele, the Medical Director of Cadham Provincial Laboratory, Consultant for Pediatric Infectious Diseases at the Winnipeg Children's Hospital, and a Travel and Tropical Medicine Clinic Consultant with the WRHA Travel Health and Tropical Medicine Services, offered a stimulating presentation on the "Travelling Germaphobe".
- Dr. Philippe Lagacé-Wiens, a Medical Microbiologist with Diagnostic Services of Manitoba at the Saint-Boniface Hospital and a Travel and Tropical Medicine Clinic Consultant with WRHA Travel Health & Tropical Medicine Services provided a fascinating discussion entitled "Plagued by Parasites: Flies, Fleas and Dreadful Disease".
- Douglas Thidrickson, Pharmacy Manager with the Ashern Pharmacy, conveyed insight into the "Pharmacy Based Travel Health Services"
- Dr. Tim Hilderman, the Medical Lead for Vaccines with Manitoba Health, Seniors & Active Living (MHSAL) as well as the Medical Director for the Interlake Eastern Travel Health Services, educated the audience on "The Control of Emerging Infections Diseases: What Can We Actually Do?".
- Dr. Jamie Falk, Assistant Professor at the College of Pharmacy with the Rady Faculty of Health Sciences at the University of Manitoba as well as a Clinical Pharmacist, delivered a very thorough and well-received presentation on "Drug Interaction with Travellers with Chronic Medical Conditions".
- Donna Alden-Bugden, a Family Nurse Practitioner shared her personal volunteer experience of a "Journey to Ghana, Africa: Medical Mission of a Lifetime".
- Dr. Pierre Plourde, a Medical Officer of Health for Winnipeg Regional Health Authority (WRHA), as well as the Medical Director for WRHA Travel Health and Tropical Medicine Services navigated the audience through the not-so futuristic process of "DNA Vaccines: the Future of Travel Health Vaccines or Just a Bad Idea?"
- Doug Momotiuk, Rosalyn Sutley and Jane Sayer, each representing the deaf, hard of hearing and deaf-blind community respectively, very courageously and what seemed effortlessly, truly captivated the audience with their personal perspectives and tips on "How to Communicate with Travellers who are Deaf, Hard of Hearing or Deaf/Blind".
- Angela Price-Stephens, from the Canadian Nurses Protective Society (CNPS), who replaced Anika Clark, explained some of the issues surrounding "RN Prescribing and Risk Management".







APPENDIX 8



The conference organizing committee would like to once again thank everyone who helped make this conference a success! A very special thank you is extended to Crystal Shea, conference secretariat, for another year of her dedicated efforts in ensuring all of the fine details in the conference planning were timely and efficiently taken care of. It has been a pleasure working with you once again!

The Manitoba 16th Annual Conference is planned for **April 4 & 5, 2019**, so mark your calendars now! Refer to this website sometime in January 2019 for further details.

Jacquie Shackel RN, BN
Conference Chair
Coordinator, WRHA Travel Health & Tropical Medicine Services
490 Hargrave Street
Winnipeg, MB R3A 0X7
Phone: (204) 040 2538

Phone: (204) 940-2538 Fax: (204) 940-8409

Email: jshackel@wrha.mb.ca Website: www.wrha.mb.ca/travel

RETURN TO PREVIOUS



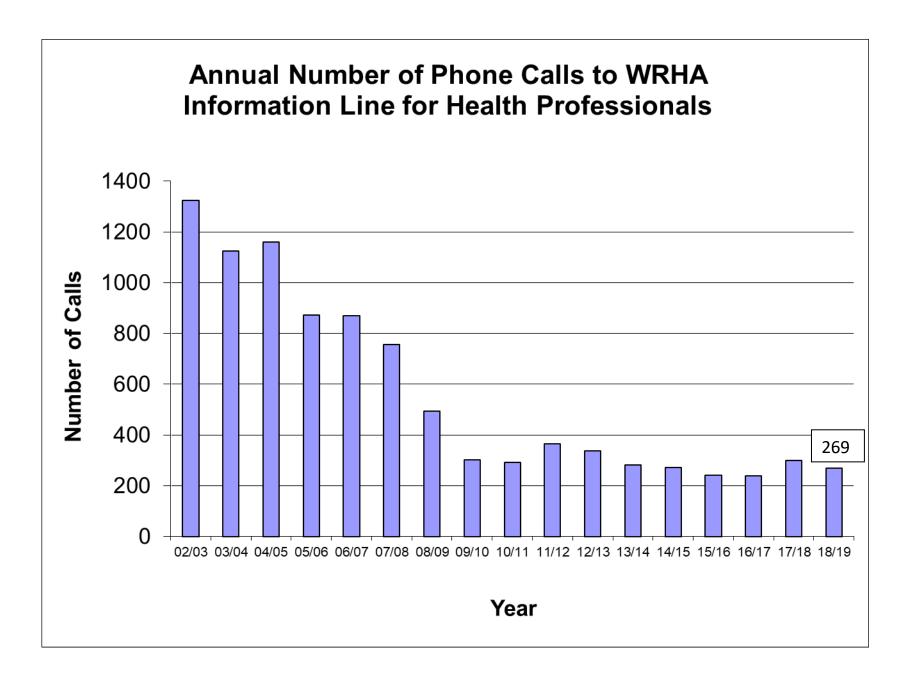


| | | Manitoba I | Directory of Travel Healtl | h Services | | |
|--|-------------------------------------|-------------------------------------|---|---------------------------|-----------------------------------|-------------------------------|
| RHA | Interlake-Eastern RHA | Prairie Mountain Health | | Northern RHA | | |
| Public Health Clinic | Public Health Clinic | Public Health Clinic | | Public Health Clinic | Public Health Clinic | Public Health Clinic |
| Privately-run Clinic | | | Privately-run Clinic | | | |
| | | Prairie Mountain Health - Travel | í | | | |
| Clinic Name | Travel Health Clinic | Health Clinic | Horizon Occupational Health Solutions | Travel Health Clinic | Primary Health Care Centre | Primary Health Care Centre |
| Address | 237 Manitoba Avenue | A5 - 800 Rosser Ave. | 436 Thompson | 867 Thompson Dr South | 1 North Ave. | 111 Cook Ave. |
| Location | Selkirk, MB | Brandon | Thompson | Thompson | Flin Flon | The Pas |
| Postal code | R1A 0Y4 | R7A 6N5 | R8N 0C6 | R8N 1Z4 | R8A 1V9 | R9A1K4 |
| Telephone | 204-785-4891 | 204-578-2521 | 204-677-7830 | 204-677-5375 | 204-687-1350 | 204-623-9678 |
| Contact | Deanna Liebrecht | Arla Kirk | Tammy Leslie | Leslie Sraybash | Charlene Martin | Rita Watier |
| | | http://www.prairiemountainhealth | · | • | | |
| Website or on-line booking | http://www.ierha.ca/ | .ca/ | | | | |
| Medical Director (MD) or Collaborative | | | | | | |
| Practice (CP) | MD: Dr. Tim Hilderman | MD: Dr. Tharina Uys | | | MD: Dr. Nyhof | |
| YF Designated Clinic/Cost per dose | Yes/\$150 | Yes/\$150 | Yes/\$200 | No | No | No |
| RHA | | | Southern Health-Santé Sud | | | Winnipeg/Churchill RHA |
| Public Health Clinic | | | | | | Public Health Clinic |
| Privately-run Clinic | Privately-run Rx Clinic | Privately-run Clinic | Privately-run Rx Clinic | Privately-run Clinic | Privately-run Rx Clinic | |
| • | • | • | , | • | <u> </u> | |
| Clinic Name | Lorette Pharmacie Dufresne | Niverville Medical Clinic | Apothecary of Morden Inc | Agassiz Medical Centre | Shoppers Drug Mart #545 | Churchill Public Health |
| Address | 10-1321 Dawson Rd. Box 229 | 111, 2nd Ave South, Box 538 | 118 Stephen St | 130 - 30 Stephen Street | 382 Main St. | Box 2500, 162 Laverendrye Ave |
| Location | Lorette, MB | Niverville | Morden | Morden | Steinbach | Churchill |
| Postal code | ROA 0Y0 | ROA 1E0 | R6M 1T3 | R6M 2G3 | R5G 1Z5 | R0B 0E0 |
| Telephone | 204-878-4122 | 204-388-6626 | 204-822-5222 or 5219 | 204-822-2605 | 204 326 3747 ext 33 | 204-675-8327 |
| Contact | Cecile Dumesnil/Louise Cooney | Dr. Chris Burnett | Lisa Zaretzky-Arnold | Darlene Blatz | Hans B. Epp | Melissa Collins |
| Email | | Dr. Onno Barrott | Elod Editoleky / Whold | Barrono Brate | asdm545@shoppersdrugmart.ca | Wonded Commo |
| Lindii | | | | | https://www1.shoppersdrugmart.ca/ | |
| | https://www.hq3.ca/LorettePharmacie | http://nivmedical.ca/ | | agassizmedicalcentre.com | en/Health-and-Pharmacy/travel- | |
| Website or on-line booking | <u>Dufresne</u> | naparii vii odiodii odr | | agasoizmoaloaloanii stoom | abroad | |
| Medical Director (MD) or Collaborative | CP with family physicians: | | Currently not working in collaborative practice | | <u>ab.oaa</u> | |
| Practice (CP) | offers bilingual service | MD: Dr. Chris Burnett | with MD | MD: Dr Amanda Bergman | CP: Dr. Gwynneth Van Der Byl | |
| YF Designated Clinic/Cost per dose | No | Yes/\$140 (1-4 pm on 1st & 3rd Mon) | No No | Yes/\$150 *See Note | Yes *See Note | No |
| RHA | | , | Winnipeg/Church | AIII RHA | | |
| Public Health Clinic | | | p-g-c | | | Public Health Clinic |
| Privately-run Clinic | Privately-run Clinic | Privately-run Clinic | Privately-run Clinic | Privately-run Clinic | Privately-run Clinic | 1 4510 1154141 511110 |
| , | | | | | | WRHA Travel Health & Tropical |
| Clinic Name | Assiniboine Pharmacy | Assiniboine Clinic | South Sherbrook Health Centre | Haven Medical Clinic | Red River Co-Op LTD Pharmacy | Medicine Services |
| Address | Unit D – 3111 Portage Ave | 633 Lodge Ave. | Unit B, 88 Sherbrook Street | 1763 Portage Ave | 77 Vermilion Road | 490 Hargrave Street |
| Location | Winnipeg | Winnipeg | Winnipeg | Winnipeg | Winnipeg | Winnipeg |
| Postal code | R3K 0W4 | R3J 0S9 | R3C 2B3 | R3J 0E7 | R2J 3W7 | R3A 0X7 |
| Telephone | (204) 615-1144 | 204-958-6708 | 204-774-7196 | 204-832-4644 | 204-257-1384 | 204-940-8747 |
| Contact | Rvan Buffie | Dr. Yatish Kotecha | Geoff Namaka: Health Centre Director | 20.002.0 | Julia Walker | Jacquie Shackel |
| | Tryan Bamo | 311 144011110100114 | 222. Hamara: Hoalin Contro Billottol | | ound Franci | Sasquis Silacitor |
| Website or on-line booking | | | http://www.mysherbrook.com/ | | | www.wrha.mb.ca/travel |
| Medical Director (MD) or Collaborative | | | p.s, wwwyo.io.oo.co.co.iu | | | MD: Dr. Pierre Plourde; |
| Practice (CP) | CP: Dr Duane Hartley | MD: Dr. Yatish Kotecha | MD: Dr. Johan Jacobs | MD: Dr. Ahmed Haleis | | offers bilingual service |
| YF Designated Clinic/Cost per dose | Yes/\$150 *See Note | No | Yes/ \$185 | YES *See Note | No | Yes/\$150 |
| i i besignated Cililic/Cost per dose | restation dee note | INU | 169/ \$103 | TEO DEE NOTE | INU | 169/9190 |

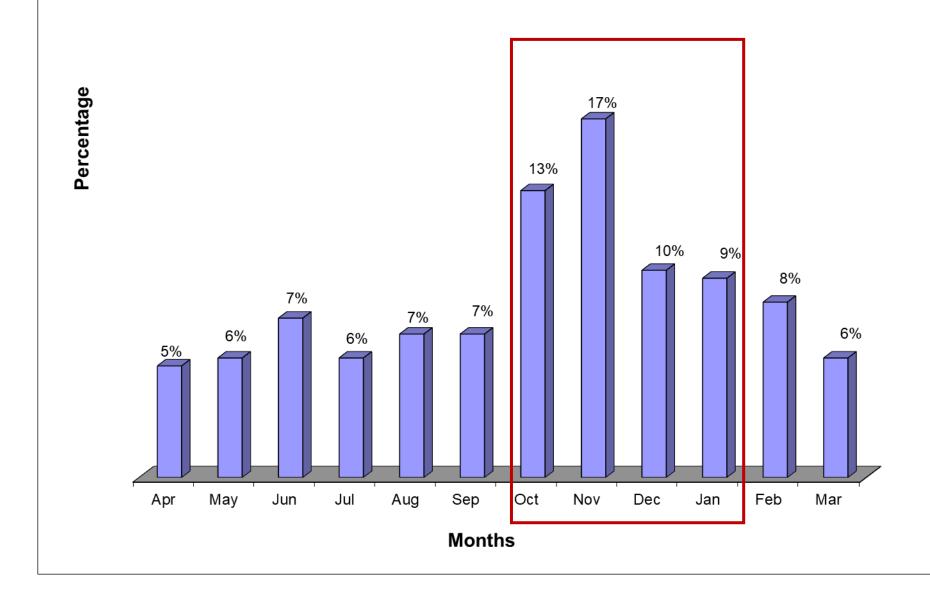
^{*} Note: Yellow Fever Vaccine not currently available at these clinics until the national shortage has ended, anticipated latter 2019.

Revised Feb 22, 2019

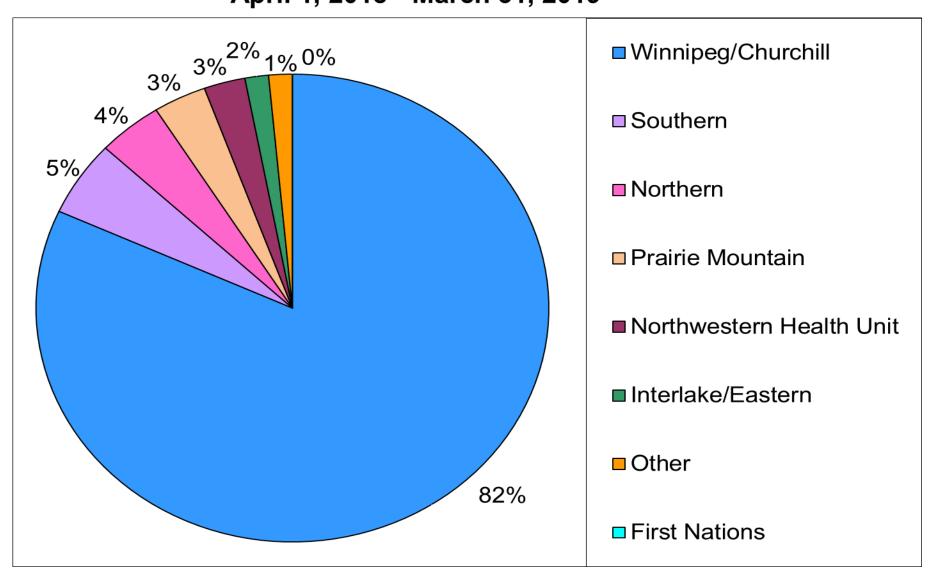
Physician 124 109 **Pharmacist 25** Nurse Other 11 Distribution of Phone Calls to WRHA Information Line for **Health Professionals** April 1, 2018 - March 31, 2019 Physician 9% 4% 46% ■ Registered Nurse □ Pharmacist Other 41%



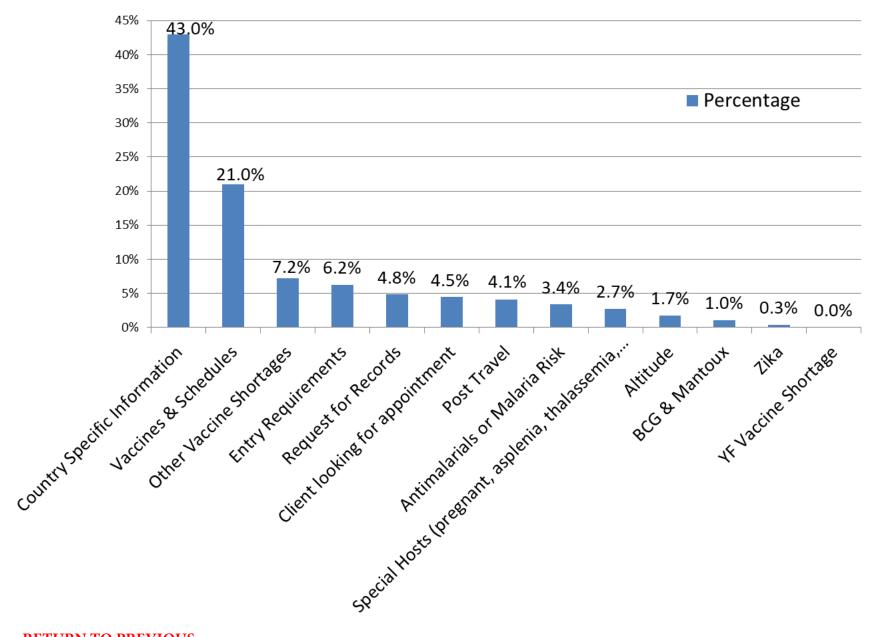
Percentage of Phone Calls to WRHA Information Line for Health Professionals: April 1, 2018 - March 31, 2019

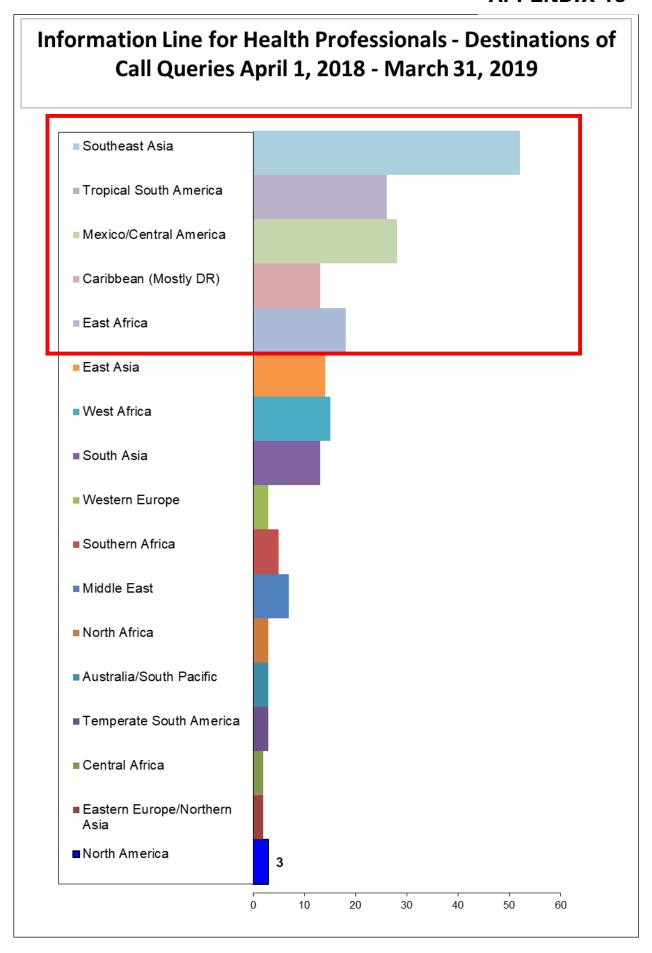


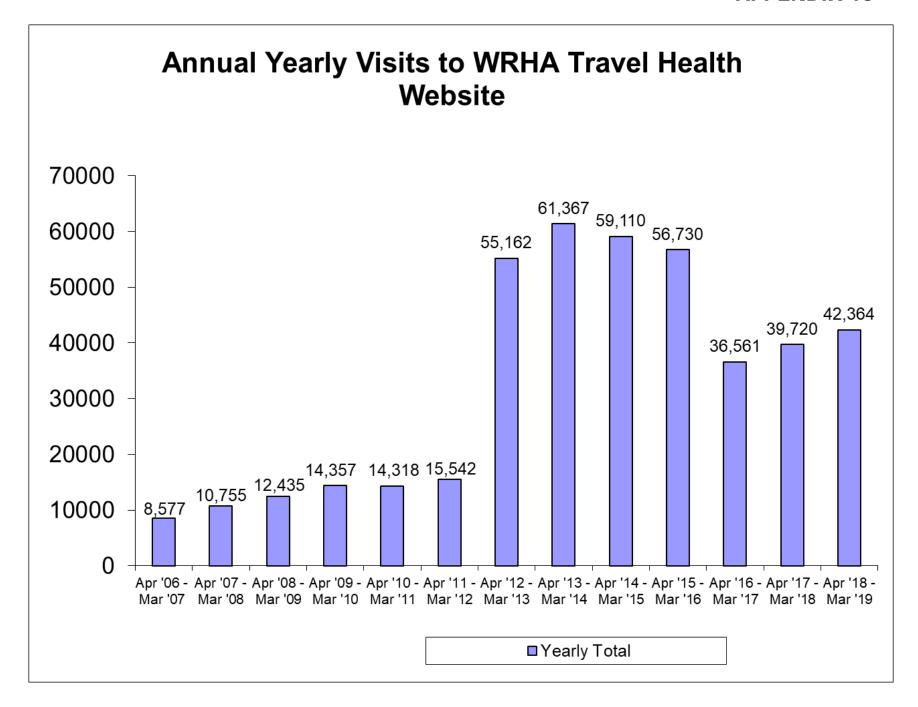
Percentage of Phone Calls by Region to WRHA Information Line for Health Professionals April 1, 2018 - March 31, 2019



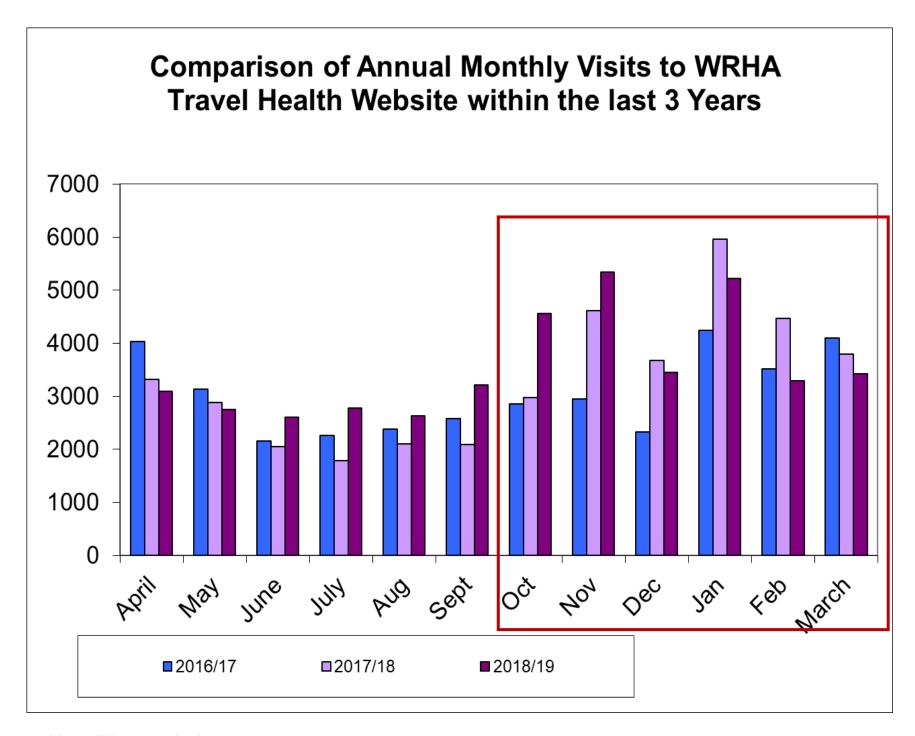
Information Line for Health Professionals Types of Calls: April 1, 2017 - March 31, 2018

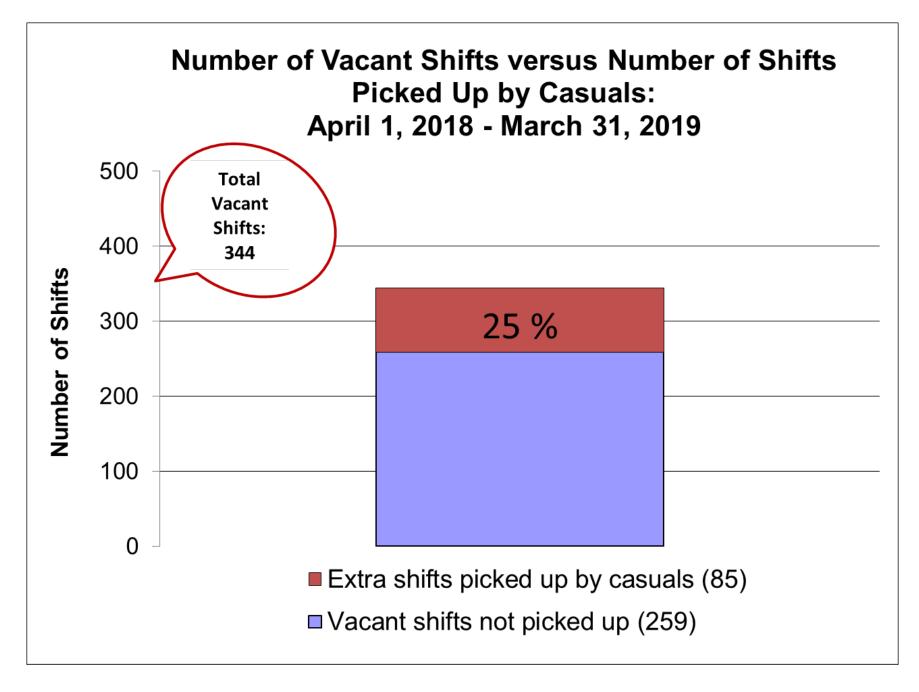


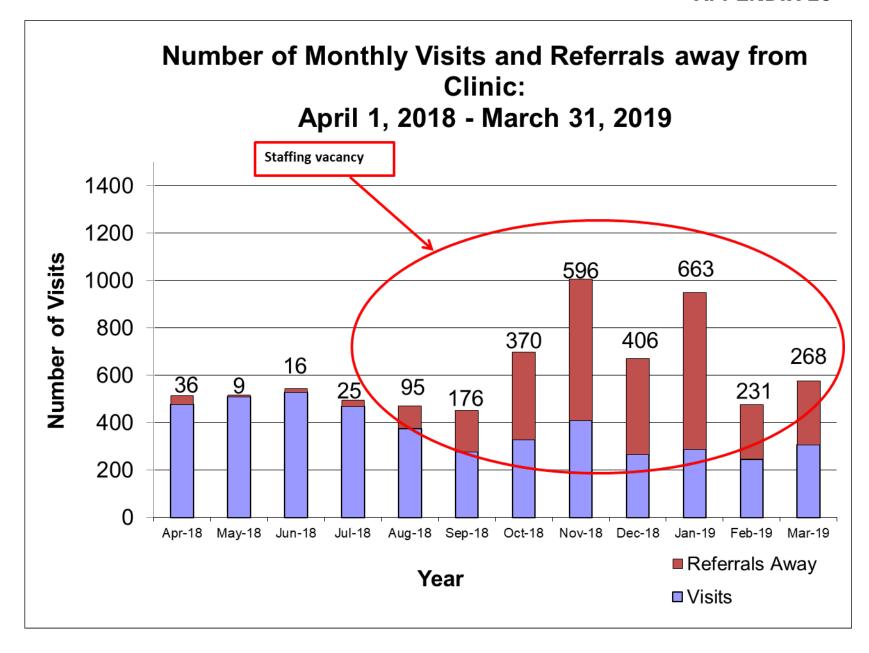


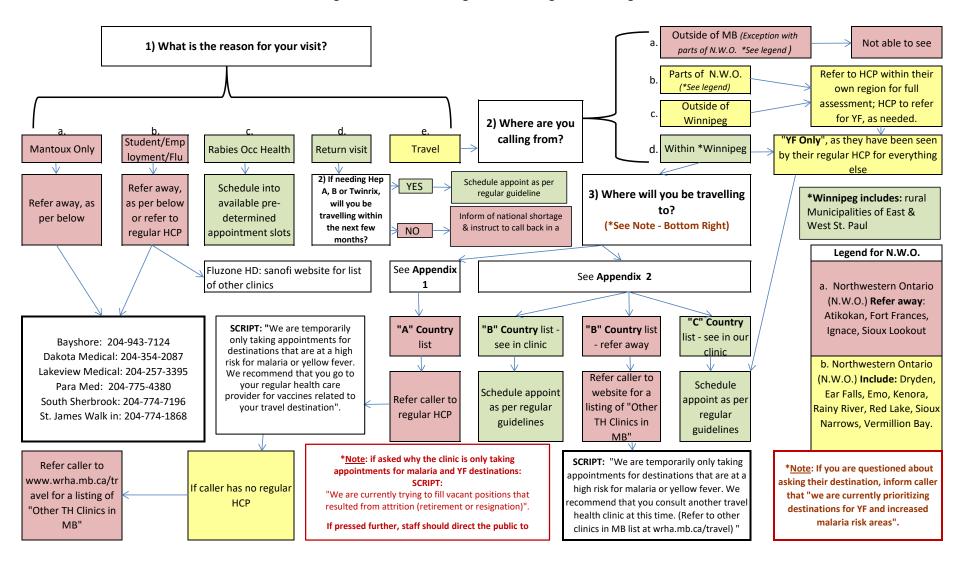












Description: The report below outlines program statistics surrounding workload, volume of services, immunizations, inventory, referral information, and client travel details based on the chosen date parameters. The information is required to provide MBH with statistics on the Rabies Occupational Health Program.

Date: 01 Apr 2018 to 31 Mar 2019

Volume of Services

| New Visits | Tariff | Counter |
|--|-----------------------|---------|
| A - New Family | P9004 | 9 |
| A - New Visit | P9002 | 146 |
| B - Consult - Each Child | P9015 | 21 |
| B - New Family | P9016 | 28 |
| B - New Visit | P9001 | 1,412 |
| C - Consult - Each Child | P9018 | 26 |
| C - New Family | P9012 | 15 |
| C - New Visit | P9005 | 587 |
| Child Consult Follow-up | no tarrif assigned | 45 |
| Immunization Only | P9013 | 19 |
| Mantoux Visit 1st | P9020 | 101 |
| Prescription Only | P9006 | 22 |
| Purchase Only | no tarrif assigned | 2 |
| Yellow Fever - Fractional Dosing Visit | p9030 | 458 |
| Yellow Fever Only | P9011 | 178 |
| Total | | 3,069 |

| Return Visits | Tariff | Counter |
|-----------------------------|-----------------------|---------|
| Copy of Immunization Record | P5006 | 25 |
| Copy of Invoice | P5017 | 1 |
| Mantoux Reading | no tarrif assigned | 157 |
| Mantoux Visit 2nd | P7009 | 49 |
| Return Visit | P9003 | 826 |
| | P9021 | 46 |
| Total | | 1,104 |

Grand Total of Number of New and Return Travel Health Visits

4,173

| Rabies | Tariff | Counter |
|------------------------|-----------|---------|
| Rabies Visit - Booster | no tarrif | 1 |
| | assigned | |
| Rabies Visit - New | no tarrif | 78 |
| | assigned | |
| Rabies Visit - Return | no tarrif | 152 |
| | assigned | |
| Total | | 242 |

| Post Travel Health Visits | Tariff | Counter |
|---------------------------|-----------|---------|
| Post Travel New Visit | no tarrif | 111 |
| | assigned | |
| Post Travel Return Visit | no tarrif | 97 |
| | assigned | |
| Total | | 208 |

| Education/Employee | Tariff | Counter |
|-------------------------------|--------|---------|
| Education / Employee - Return | P9010 | 28 |
| Education / Employee New | P9009 | 36 |
| Total | | 64 |

Grand Total of Number of Visits/Contacts in Travel Health Clinic

4,687

Certificates & Prescriptions

| Certificate | | Counter |
|--|------------------------------|---------|
| Certificate of Medical Contraindication To Vaccination (CMCV) | Polio (IPV) | 0 |
| | Yellow Fever | 230 |
| | Yellow Fever Fractional Dose | 582 |
| International Certificate of Vaccination or Prophylaxis (ICVP) | Polio | 18 |
| • • | Yellow Fever | 446 |

Malaria Chemoprophylaxis

| Malaria Prescription | Counter | Declined |
|----------------------|---------|----------|
| Chloroquine | 1 | 0 |
| Doxycycline | 88 | 6 |
| Malarone | 106 | 8 |
| Mefloquine | 17 | В |
| Total | 2,14 | 2 80 |
| % | | 3.60 |

Products Sold

| Product | Counter |
|--|---------|
| Bed Net (ITN) | 68 |
| Bens (120 ml) | 22 |
| Bens (177 ml) | 1 |
| Care Plus Insect Repellent pump spray 100 ml 20 % | 59 |
| Care Plus Insect Repellent pump spray 100 ml 30 % DEET | 78 |
| Micropur Tabs | 19 |
| Watkins (240 ml) | 35 |
| Watkins (80 ml) | 54 |
| Total | 336 |

Language Services

| Description | Counter |
|-------------------|---------|
| Interpreter used | 0 |
| Service in French | 25 |

Referral

| rtororrar | | |
|------------------------------|---------|--------|
| Referral Source for Client | Counter | % |
| Employer | 57 | 2.26 |
| Family or Friends | 720 | 28.54 |
| Health Care Provider | 532 | 21.09 |
| Internet | 361 | 14.31 |
| Media | 9 | 0.36 |
| Other | 21 | 0.83 |
| Previous Client of TH Clinic | 567 | 22.47 |
| School / University | 70 | 2.77 |
| Telephone Directory | 12 | 0.48 |
| Travel Agent | 60 | 2.38 |
| WRHA Website | 114 | 4.52 |
| Total | 2,523 | 100.00 |

| | | iza | |
|--|--|-----|--|
| | | | |
| | | | |

| Immunizations | l= | | | 2 |
|---|-----------------|-----------|---------------|--------------------|
| Immunization DaPTP (Quadracel) | Tariff Total | Counter 1 | Declined 0 | % Declined 0.00 |
| DaPTP/HIB (Pentacel) | Total | 2 | 1 | 33 33 |
| Dukoral (1-dose series) | Total | 13 | 0 | 0.00 |
| | | | | |
| Dukoral (2-dose series) | Total | 24 | 41 | 63.08 |
| ETBE (European Tick Borne Encephalitis) | Total | 0 | 0 | |
| Hepatitis A (Adult & Ped) | Total | 825 | 97 | 10.52 |
| Hepatitis A/B (Adult & ped) | Total | 751 | 89 | 10.60 |
| Hepatitis B (Adult & Ped) | Total | 331 | 182 | 35.48 |
| HPV - 2 | Total | 0 | 0 | |
| HPV - 4 | Total | 0 | 0 | |
| HPV - 9 | Total | 0 | 0 | |
| Influenza High Dose (HD) Trivalent | Total | 15 | 0 | 0.00 |
| Influenza IM (seasonal) | Total | 318 | 374 | 54.05 |
| Influenza Intranasal (seasonal) | Total | 16 | 0 | 0.00 |
| ISG | Total | 0 | 0 | |
| | | | | 70.40 |
| Japanese Encephalitis | Total | 85 | 203 | 70.49 |
| Measles Mumps Rubella (MMR) | Total | 608 | 288 | 32.14 |
| Measles Mumps Rubella Varicella (MMRV) | Total | 43 | 13 | 23.21 |
| Meningococcal Meningitis (4CMenB) - Bexsero | Total | 1 | 0 | 0.00 |
| Meningococcal Meningitis (A/C/Y W135) - Menomune & | Total | 279 | 297 | 51.56 |
| Menactra/Menveo/Nimenrix Meningococcal Meningitis (C-conjugate) | Total | 6 | 2 | 25.00 |
| Pneumococcal (pneumo 23) | Total | 9 | 8 | 47.06 |
| Pneumococcal (prevnar 13) | Total | 0 | 5 | 100.00 |
| Polio (IPV) | Total | 315 | 246 | 43.85 |
| | | 2 | 0 | |
| Rabies - Post | Total | | | 0.00 |
| Rabies - Pre (ID & IM; funded & non-funded) | Total | 220 | 53 | 19.41 |
| Rotavirus | Total | 0 | 0 | |
| TdaP (publicly funded & non-publicly funded) | Total | 660 | 30 | 4.35 |
| Tetanus Diphtheria & Polio (Tdp) | Total | 0 | 0 | |
| Tetanus Diphtheria (Td) | Total | 32 | 1 | 3.03 |
| Tetanus Diphtheria, Pertussis & Polio (Tdap Polio) | Total | 31 | 0 | 0.00 |
| Tubersol | Total | 168 | 0 | 0.00 |
| (Mantoux/TST- includes one-step, two-step, vearly and post-travel) Typhoid Capsules & Injectables | Total | 321 | 94 | 22.65 |
| Varicella | Total | 9 | 2 | 18.18 |
| | | | | 10.10 |
| Vivaxim (Hepatitis A and Typhoid) | Total | 0 | 0 | |
| Yellow Fever (Booster) | Total | 0 424 | 15 | 100.00 |
| Yellow Fever | Total | 578 | 4 | |
| Yellow Fever (Fractional Dosing) Zoster (Shingles) | Total Total | 1,002 | 158 0 | 13.62 |
| Total | Total | 6,087 | 2,199 | 26.54 |

Travel Details

| Length of Time Between Date of Service and Date of Departure | Days |
|--|-------|
| Average | 39.63 |

| Duration f Trip | Days |
|------------------------|-------|
| Average Number Of Days | 31.92 |

| Accomodation | Counter | % |
|--|---------|--------|
| Accommodation Other: | 52 | 1.55 |
| Camping | 352 | 10.52 |
| Cruise Ship | 159 | 4.75 |
| Hostel | 377 | 11.27 |
| Hotel | 1,726 | 51.58 |
| Local Family & Friends, Including Billet | 680 | 20.32 |
| Total | 0.04/ | 400.00 |

| Purpose of Travel | Counter | % |
|------------------------------------|---------|--------|
| Adoption | 0 | 0.00 |
| Business | 170 | 6.00 |
| Elite Athlete | 5 | 0.18 |
| Medical Tourism | 2 | 0.07 |
| Religious | 26 | 0.92 |
| Student | 70 | 2.47 |
| Tourist | 1,537 | 54.29 |
| Visiting Ex Pat's | 54 | 1.91 |
| Visiting Friends & Relatives (VFR) | 585 | 20.66 |
| Work Abroad | 382 | 13.49 |
| Total | 2,831 | 100.00 |

| Destination | Counter | % |
|-------------------------------|---------|--------|
| Africa, Central | 66 | 2.14 |
| Africa. East | 679 | 22.02 |
| Africa, North | 26 | 0.84 |
| Africa, Southern | 222 | 7.20 |
| Africa, West | 210 | 6.81 |
| Asia. East | 124 | 4.02 |
| Asia. South | 341 | 11.06 |
| Asia, South East | 289 | 9.37 |
| Australia / South Pacific | 28 | 0.91 |
| Caribbean | 70 | 2.27 |
| Europe, East (and North Asia) | 17 | 0.55 |
| Europe, Western | 114 | 3.70 |
| Mexico / Central America | 101 | 3.28 |
| Middle East | 67 | 2.17 |
| North America | 15 | 0.49 |
| South America, Temperate | 85 | 2.76 |
| South America, Tropical | 626 | 20.30 |
| Unknown Travel Destination | 3 | 0.10 |
| Total | 3,083 | 100.00 |

ID Rabies Provincial

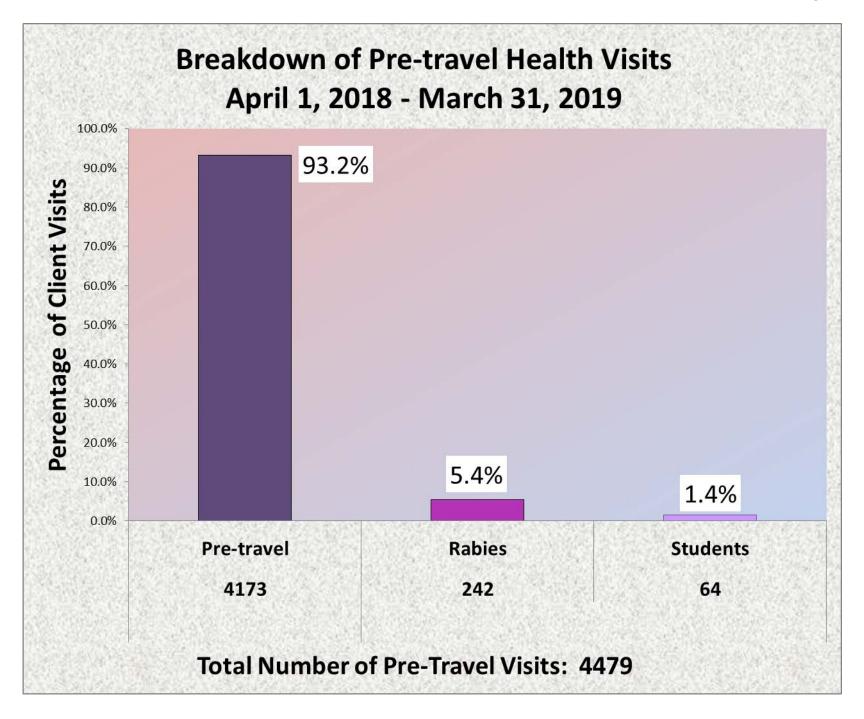
| Encounter Notes | Counter |
|--|---------|
| Rabies Occ. Health Services: Due for Immunization | 75 |
| Rabies Occ. Health Services: Due for Serology | 377 |
| Rabies Occ. Health Services: Newly Enrolled, Unknown Status | 81 |
| Rabies Occ. Health Services: Serology Pending | 0 |
| Rabies Occ. Health Services: Serology Results - Booster Indicated | 18 |
| Rabies Occ. Health Services: Serology Results - Immune | 231 |
| Rabies Occ. Health Services: Transfer of Service | 17 |
| Total | 799 |
| # of Serology Requisitions Ordered | Counter |
| Cadham General Requisition - ID Rabies Serology | 516 |

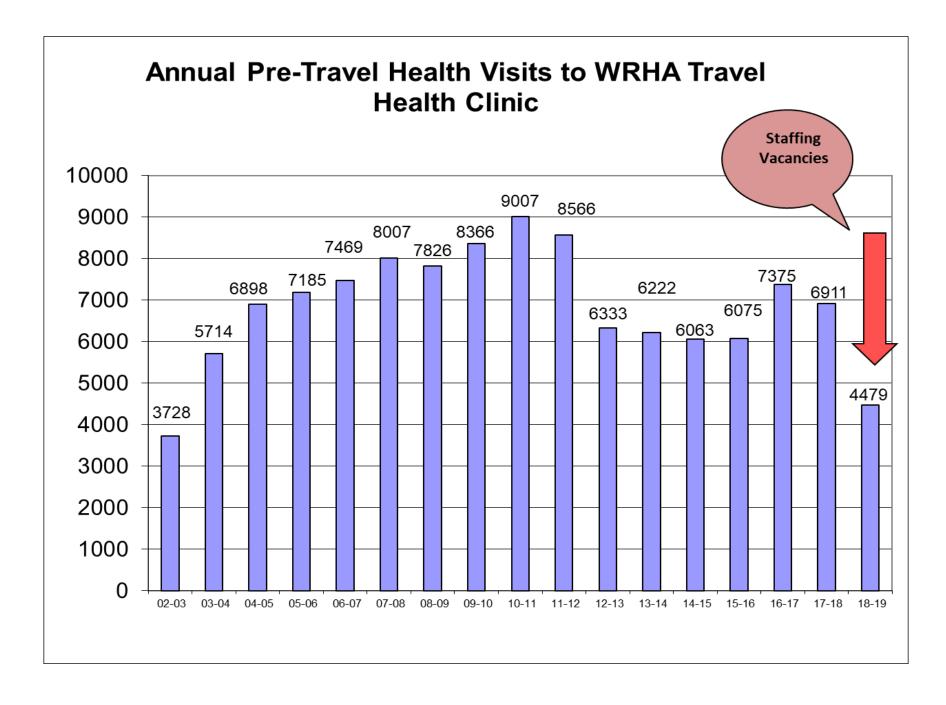
| Appointment Type | Arrived | No Show | Total |
|------------------------|---------|---------|-------|
| Rabies Visit - New | 78 | 3 | 81 |
| Rabies Visit - Return | 152 | 6 | 158 |
| Rabies Visit - Booster | 12 | 0 | 12 |
| Total | 242 | Q | 251 |

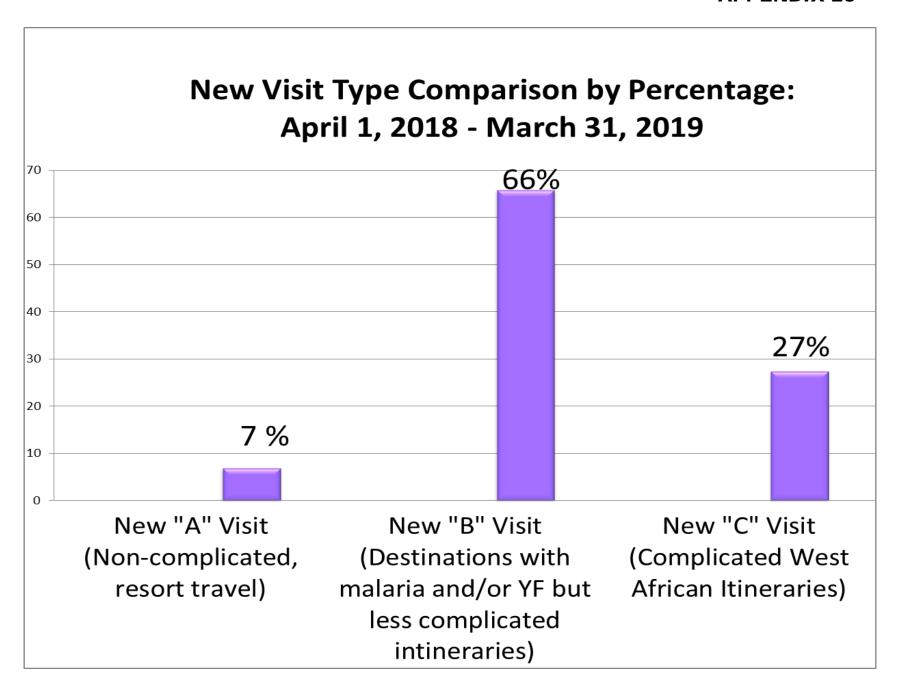
| Service - # of Individuals Entered Into Medical | Counter |
|---|---------|
| Rabies Occ Health Services | 14 |
| | |
| Vaccine Type | Counter |
| Rabies ID | 23 |
| Rabies IM | |
| T I | 00 |

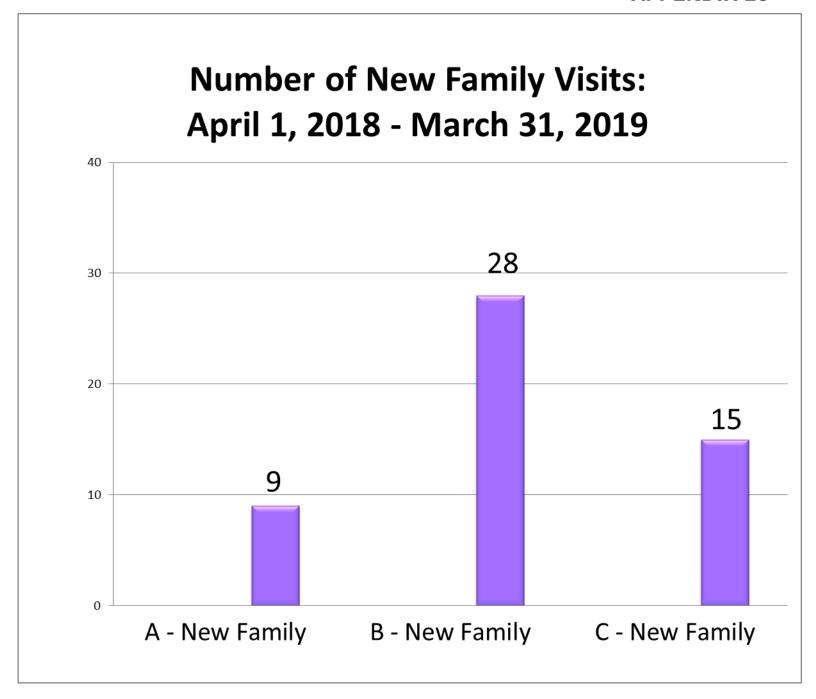
Manitoba Health Reporting Requirements

| Description | Counter |
|--|---------|
| # of Doses Administered As Part Of A New Series | 229 |
| # of Visits As Part Of A New Series | 239 |
| # of Visits for Booster Doses | 12 |
| # of Serology Samples (Req's) Submitted | 517 |
| # of Serology Results Analyzed | 249 |
| # of Individuals Enrolled In Rabies Occ Health Program | 145 |
| Description | % |
| % Initiating Primary Series Following Generated Letter | 49.68 |
| % Initiating Booster Following Generated Letter | 66.67 |
| % of Serology Results Analyzed | 48.16 |

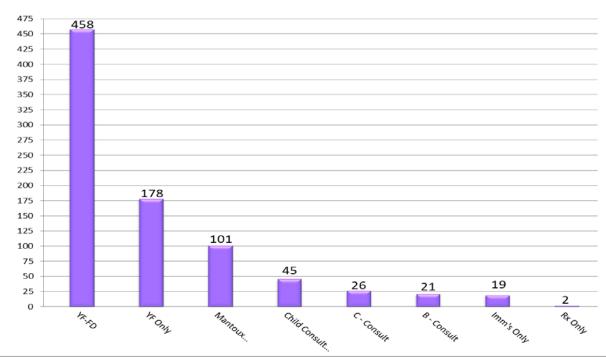


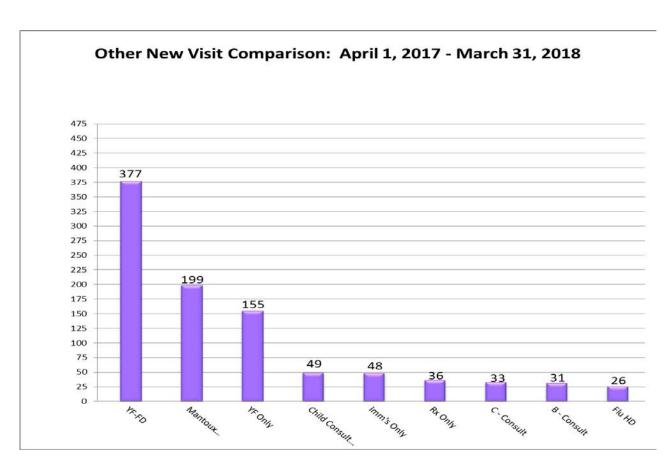






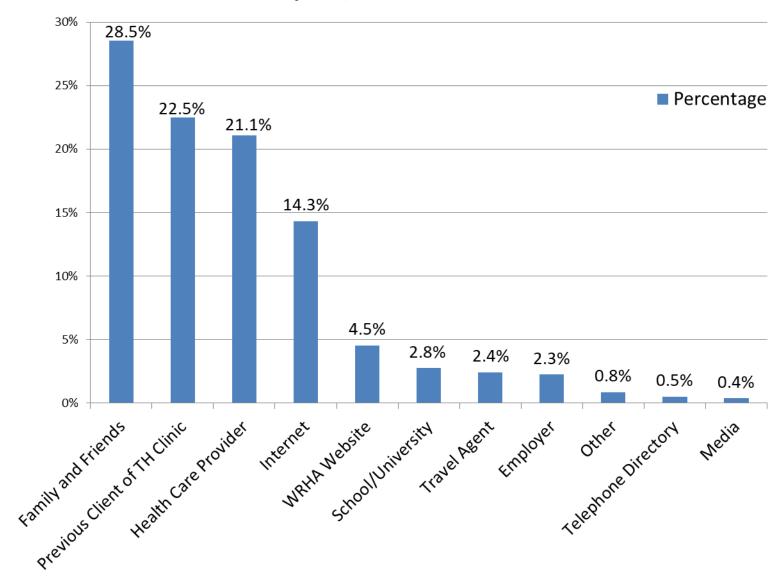


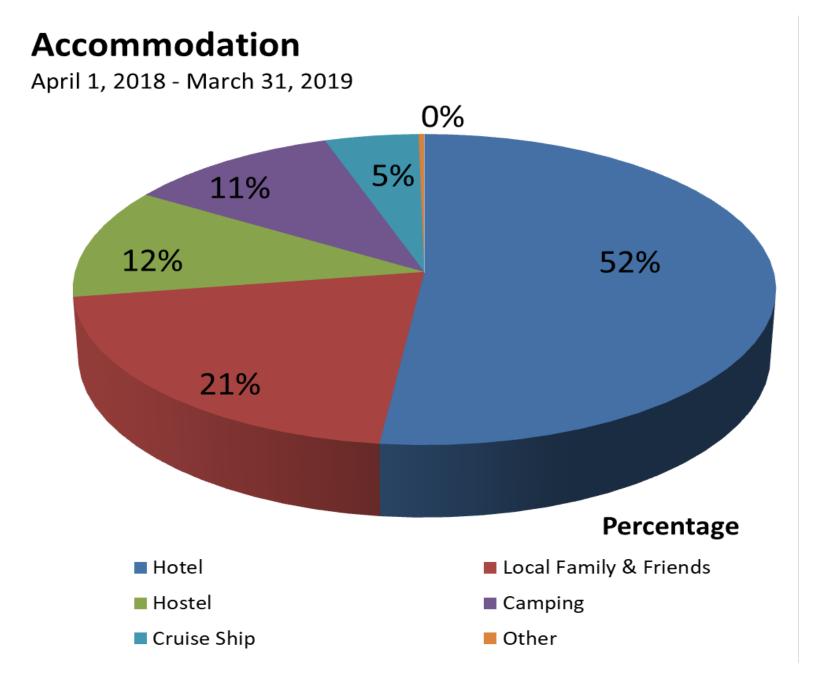


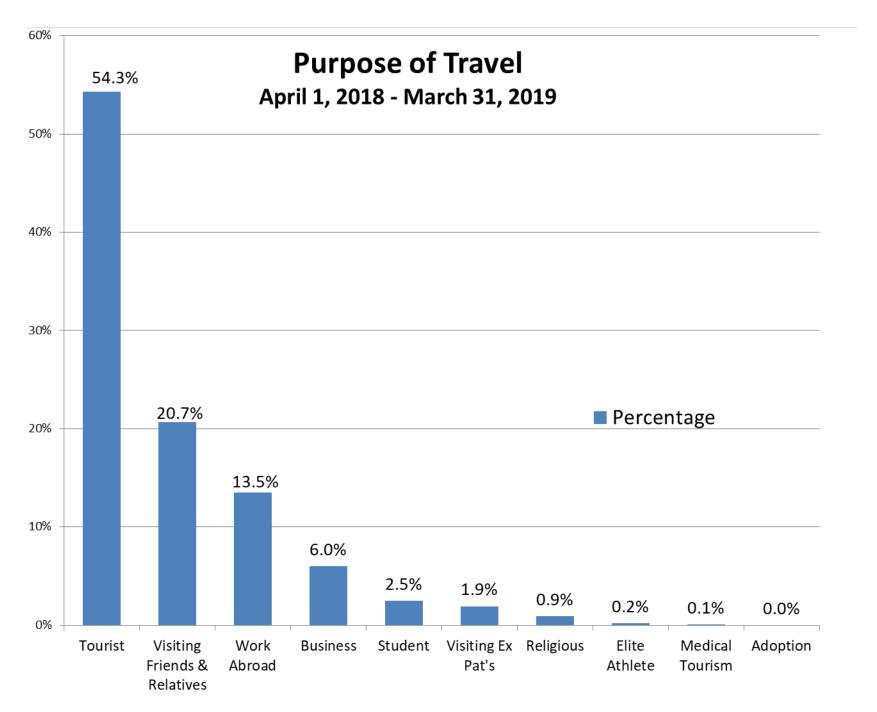


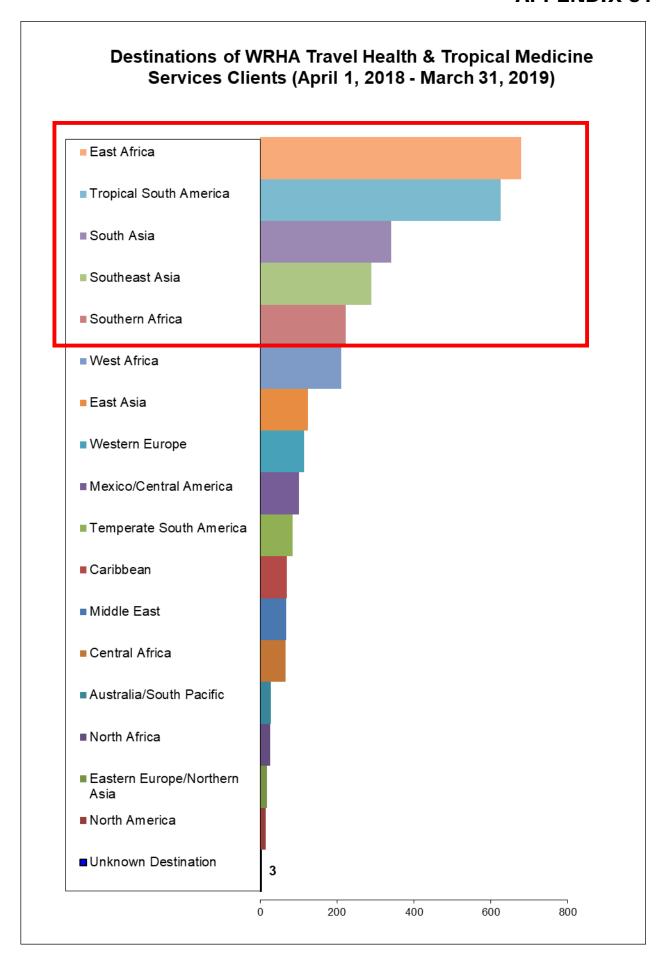
Referral Source for Client

April 1, 2018 - March 31, 2019









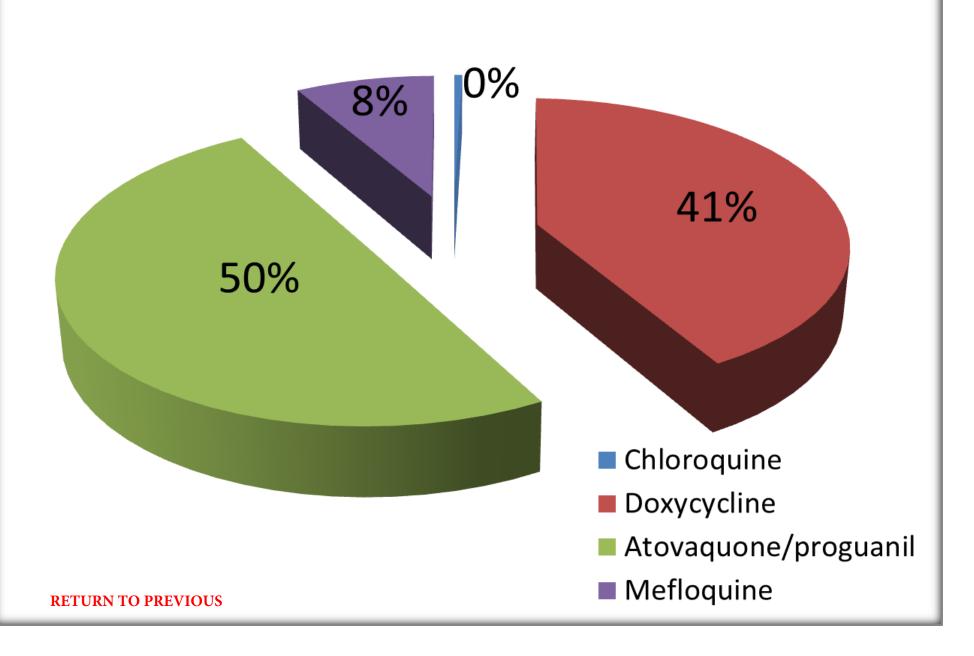
Destination Comparison by Year

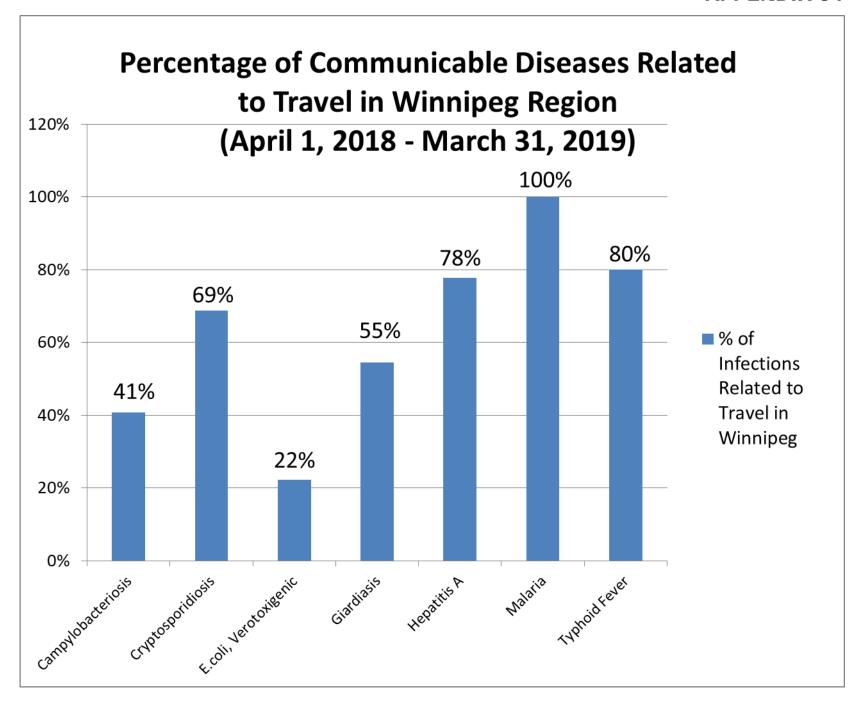
| 2015/2016 | 2016/2017 |
|------------------------|------------------------|
| Top 5 destinations | Top 5 destinations |
| Southeast Asia | Southeast Asia |
| Mexico/Central America | Mexico/Central America |
| Tropical South America | Tropical South America |
| Caribbean | East Africa |
| East Africa | Caribbean |

| 2017/2018 | 2018/2019 |
|------------------------|------------------------|
| Top 5 destinations | Top 5 destinations |
| Southeast Asia | East Africa |
| Tropical South America | Tropical South America |
| Mexico/Central America | South Asia |
| East Africa | Southeast Asia |
| South Asia | Southern Africa |

Antimalarial Medication

(April 1, 2018 - March 31, 2019)





APPENDIX 35

