Improvement of Post-transplant Vaccination Administration & Tracking Amongst Autologous and Allogeneic Bone Marrow Transplant Recipients

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The Problem

- Bone marrow transplant (BMT) patients are a vulnerable population
- Of 460 patients receiving allogeneic BMTs from 1987-1990, 2/3 were deceased within 2 years\(^1\)
- Most common primary & secondary cause of death: Infection, many of which are vaccine preventable
- Centralized tracking of vaccination within the BMT clinics remain inadequate, with only one-third of UCSF fellows’ clinical documentation appropriately documentation vaccination status

Project Goal

Vaccinate 90% of eligible patients against Hepatitis B
- Hepatitis B is administered at 6, 9, and 12 month milestones post-transplant, and therefore reflects vaccination status at each milestone through yr 1

Project Planning

- Background
  - As part of ongoing fellowship program improvement, ACGME fellows conducted a clinical documentation chart review between January and June 2014
  - Only 35% of bone marrow transplant recipients had appropriate documentation of vaccination status
  - Only 50% had organized survivorship plans
- Planning
  - Background data presented at a Div. of Hematology & Oncology fellows’ meeting, with concomitant didactics regarding post-BMT vaccine administration and contraindications
  - Fellow input then used in project development

Results

- Fellows track 10 allogeneic and/or autologous bone marrow transplant care encounters
- Encounter documentation is then reviewed for:
  - Evidence of vaccine administration, -OR-
  - Discussion of why vaccines were not administered, at each milestone (6, 9 or 12 mo, as appropriate)

References