EDN Summary

10/13/15

Direct access to EDN has been useful in improving the information communicated to health clinics prior to initial refugee domestic health evaluations. Over the last year (October 2014 – October 2015), we have been able to obtain data on empiric treatment for parasites and immunizations delivered immediately pre-departure. Specifically, this workflow has resulted in additional information on vaccinations for approximately one third of refugees and additional information on empiric treatment for approximately two thirds of refugees.

In addition to improved capacity to provide appropriate care, additional potential benefits include:

* Avoided duplication of vaccines
* Reduced risk of side effects
* Decreased time to full vaccination
* Decreased number of visits required
* Decreased delay in entering school and work
* Reduced total cost of vaccines and vaccine administration
* Confirmed anti-parasitic treatment – improving capacity of providers to evaluate the presence of eosinophilia and gastro-intestinal symptoms
* Additional potential saving for others sites would include reduction in need for stool ova and parasite testing and patient education, urinanalysis, and potentially duplicative treatment
* Reduction of 3% FTE for a single resettlement agency with 14 arrivals per week

Of the 48 refugees who had more vaccination information included in EDN compared to the scanned forms, there were 45 Td, 45 MMR, and 42 HepB vaccinations.