



AIRA
AMERICAN IMMUNIZATION
REGISTRY ASSOCIATION

INFORMATION REQUEST

Topic: IIS Handling of Polio Unspecified (CVX 89)

Request Date: February 5, 2025

Information Requested:

The Washington State Department of Health (DOH) is seeking information regarding IIS handling of polio unspecified (CVX 89). As an unspecified CVX code, CVX 89 may represent any formulation of the polio vaccine. However, receipt of certain formulations (OPV monovalent, bivalent, and unspecified) may leave a patient under-vaccinated for polio. Among the OPV formulations, only the OPV trivalent formulation administered on or after April 1, 2016, is considered valid for completion of US polio recommendations. Given this, Washington's DOH would like answers to the following questions:

- How does your IIS treat CVX 89 in relation to the completion of US polio recommendations? In other words, does your IIS consider a CVX 89 as counting toward the completion of the polio series, or does your IIS consider it invalid toward the completion of the polio series?
- Does your IIS follow up on submitted reports of CVX 89 and map the CVX 89 to a more specific polio CVX code? If so, what information is used to determine what CVX code to map to?
- Does your IIS make different decisions if you know CVX 89 was administered outside of the United States versus inside?

Requesting Member: Katherine Graff

Responding Member(s): Karen Miller (CO), Kuen (Iris) Cheng (NYC)

Results:

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Colorado:

Our IIS treats doses entered with CVX 89 as valid, regardless of the date administered. I reached out to CDC CDSi user support regarding this, asking if it would be appropriate to add logic that assumes doses administered after April 1, 2016, are invalid. They declined to make this change since some doses (e.g., trivalent IPV) are valid. We are not currently conducting any cleanup or mapping for doses entered with CVX code 89 administered after April 1, 2016.

In September 2024, we decided to update our polio naming convention in our IIS (i.e., CIIS) in an attempt to increase data quality by reducing mistakes when users enter polio vaccination histories. We coupled this naming convention update with provider education.

For CVX 89 specifically, we updated the name from **Polio, Unsp** to **Polio-Unsp trivalent**, since the CDSi logic assumes this vaccine is either trivalent OPV or trivalent IPV and counts the dose as valid.

See below for the guidance that we drafted regarding this topic.

**Updated polio naming convention in CIIS
September 2024**

The name, description, and vaccine hover text for oral polio vaccines in CIIS have been updated. In addition, fractional IPV has been added as a historical vaccine option when entering polio vaccination histories.

| CVX/HL7 ID | Previous name in CIIS | Updated name in CIIS | Description/Vaccine Hover Text |
|------------|-----------------------|----------------------|--|
| 10 | Polio-IPV | Polio-IPV | Poliovirus vaccine, inactivated |
| 89 | Polio, Unsp | Polio-Unsp trivalent | Poliovirus vaccine, unspecified formulation, trivalent |
| 2 | Polio-OPV | Polio-OPV trivalent | Trivalent oral polio vaccine (types 1, 2, and 3) |



| | | | |
|-----|-------------------|---------------------------|---|
| 178 | OPV Bivalent | Polio-OPV bivalent | Non-US bivalent oral polio vaccine (types 1 and 3) |
| 179 | OPV Monovalent UF | Polio-OPV monovalent unsp | Non-US monovalent oral polio vaccine, unspecified formulation |
| 182 | OPV, UF | Polio-OPV unspecified | Oral Polio Vaccine, unspecified formulation |
| 324 | N/A | Polio-fractional IPV | Poliovirus, inactivated, fractional-dose (fIPV) |

Polio-IPV: This is the only polio vaccine administered in the United States. This option should be used for any IPV vaccine administered. The vaccine will display as valid on CIIS records, assuming proper age and spacing were followed.

Polio-Unsp trivalent: This option assumes the polio vaccine, either IPV or OPV, is a trivalent formulation. This option should be used only for doses administered prior to April 1, 2016. The vaccine will display as valid on CIIS records, assuming proper age and spacing were followed. Doses administered after April 1, 2016, require additional research to determine if they were OPV or IPV. The [World Health Organization dashboard](#) resource can help; search based on the country of vaccination.

Polio-OPV trivalent: In general, unless specifically specified, OPV doses administered prior to April 1, 2016, are presumed to be trivalent. Use this entry for any OPV dose administered prior to April 1, 2016. The vaccine will display as valid on CIIS records, regardless of date administered, assuming proper age and spacing were followed.

Polio-OPV bivalent, Polio-OPV monovalent unsp, and Polio-OPV unspecified: Use one of these three options for any OPV vaccine administered after April 1, 2016, or for any specified monovalent dose administered prior to April 1, 2016, administered during a vaccine campaign. Use Polio-OPV unspecified if either bivalent or monovalent is not specified. These vaccines will always be marked as invalid on CIIS records, since monovalent and bivalent polio vaccines do not count toward US vaccination standards.

Polio-fractional IPV: This option was newly activated on the “add as historical” immunization screen in CIIS. Fractional IPV is $\frac{1}{5}$ of a full dose of IPV, administered intradermally outside of the United States. Two fractional doses of IPV (fIPV) are considered



valid and count as one intramuscular dose of IPV. If an individual receives only one dose of fIPV, this dose will be considered invalid. Six countries include two fractional doses of IPV as part of their routine immunization schedule: Bangladesh, Cuba, Ecuador, India, Nepal, and Sri Lanka.

Polio vaccine resources:

[ACIP Recommendations – Polio Vaccine](#)

[Routine Polio Vaccination](#)

[World Health Organization – Vaccination schedule for Poliomyelitis for Mexico](#)

[CDC Pink Book – Chapter 18: Poliomyelitis](#)

New York City:

Here is our response from New York City IIS:

1. How does your IIS treat CVX 89 in relation to the completion of US polio recommendations? In other words, does your IIS consider a CVX 89 as counting toward the completion of the polio series, or does your IIS consider it invalid toward the completion of the polio series?

[We do count CVX 89 as valid toward the completion of the polio series.](#)

2. Does your IIS follow up on submitted reports of CVX 89 and map the CVX 89 to a more specific polio CVX code? If so, what information is used to determine what CVX code to map to?

[We do not follow up with providers particularly because they report CVX 89.](#)

[However, we have a cleanup process for not otherwise specific vaccine codes \(NOS Recode\) to convert NOS CVX to more specific CVX in the same vaccine group by checking on the reported NDC.](#)

3. Does your IIS make different decisions if you know CVX 89 was administered outside of the United States versus inside?

[We do not differ any evaluations based on where the CVX 89 was administered.](#)

Also note among other Polio NOS, we have CVX 182 in our information system, so that helps to differentiate if it's a polio NOS (CVX 89) versus an oral NOS (CVX 182). People who received unspecified OPV should be reported under CVX 182, and it does not count toward series completion.

Also see [Ask The Experts About Vaccines: Polio | Immunize.org](#).



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How do I determine if doses of oral polio vaccine (OPV) administered outside the United States were trivalent OPV?

Use the date of administration to make a presumptive determination of what type of OPV was received. Only trivalent doses count as valid for the US polio vaccination schedule. Trivalent OPV (tOPV) was used throughout the world before April 2016. In April 2016, all countries using tOPV switched to bivalent OPV (bOPV). In addition, some countries also use monovalent OPV (mOPV) during special vaccination campaigns. Doses recorded as bOPV or mOPV and unspecified OPV doses noted on an immunization record as given during a vaccination campaign do not count as valid doses for the US polio vaccination schedule. You may count a record of an “OPV” dose as valid if the dose was administered before April 1, 2016, and was not noted as being administered as part of a mass vaccination campaign. OPV doses administered on or after April 1, 2016, should not be counted as a valid dose for the US polio vaccination schedule.

Last reviewed: July 23, 2023