

Foreword

The 2003 Immunization Program Operations Manual (IPOM) was developed as a compilation of resources to assist immunization program managers and their staff in implementing comprehensive immunization programs. Grantees were instructed to use the IPOM in conjunction with the annual grant guidance document to develop objectives, activities, and evaluation measures that maximize immunization program effectiveness.

The 2008-2012 IPOM builds upon the 2003 version. However, the 2008-2012 IPOM is intended to be used as a core companion document to the 2008 program announcement that covers the five year immunization grant cycle from January 1, 2008 through December 31, 2012.

The layout and format of the 2008-2012 IPOM differ significantly from the 2003 IPOM, as summarized in the following table:

2003 IPOM	2008-2012 IPOM
The Introduction is brief.	The Introduction is replaced by a new introductory chapter called “The Basics” which is an expanded compilation of core overview documents for everyday reference by program management staff. Most documents within “The Basics” have been sent in the past to program managers via email, but there are some new documents as well. We included “The Basics” chapter to ensure that all program managers have easy access to all these core documents. The printed documents within “The Basics” are those that are not available online (except via the IPOM website); documents that are available online are included in the “Key Immunization Websites” document. Additional documents may be added to “The Basics” in the future.
There is a Table of Contents and an Index, and page numbering continues from one chapter into the next.	The Table of Contents and Index are replaced by a summary “At A Glance” document. We anticipate making occasional updates over time; for grantees’ ease of inserting an updated chapter into their hard copies of the IPOM, each chapter starts over at page 1.
Chapter titles are based on 8 identified immunization program components: <ol style="list-style-type: none"> 1. Program Management 2. Vaccine Management 3. Immunization Registries 4. Provider Quality Assurance 5. Service Delivery 6. Consumer Information 7. Surveillance 	Chapter titles are based on the 10 program components in the 2008 program announcement, including separate components for perinatal hepatitis B, adolescent immunization, and adult immunization. The WIC-Immunization Linkage is not listed as a program requirement in the 2008 program announcement; however, the 2008-2012 IPOM includes a separate chapter (#11) on the WIC-immunization linkage as a recommendation. <ol style="list-style-type: none"> 1. Program Planning and Evaluation 2. Vaccine Accountability and Management 3. Immunization Information Systems 4. Provider Quality Assurance 5. Perinatal Hepatitis B Prevention 6. Adolescent Immunization

2003 IPOM	2008-2012 IPOM
8. Population Assessment	7. Adult Immunization 8. Education, Information, Training, and Partnerships 9. Epidemiology and Surveillance 10. Population Assessment 11. WIC-Immunization Linkage Because program management activities are determined by and are at the discretion of program management staff, the Program Management chapter has been replaced by the Program Planning and Evaluation chapter. The Vaccine Management chapter is based on the 2007 Vaccines for Children (VFC) Program Operations Guide but has been restructured to match the format of the IPOM. In addition, the Program Operations Branch (POB) recognizes that due to the overwhelming success of the VFC program, service delivery has shifted primarily to the private sector; therefore, the Service Delivery program component has been eliminated from both the 2008 program announcement and the 2008-2012 IPOM. Consumer Information has been renamed as Education, Information, Training, and Partnerships; and Surveillance has been renamed as Epidemiology and Surveillance.
Each chapter begins with keywords.	Keywords are eliminated from the chapters but are shared with our webmaster for posting to search engines.
Within each chapter, general activity areas are stated in bold print. Supporting activities are listed under each bolded activity area, but there is no sub-prioritization of activities.	Within each chapter, the sentences in bold print are the program requirements included in the 2008 program announcement. The program requirements were the outcome of a strategic planning process during 2006 between Immunization Services Division (ISD) leadership, ISD subject matter experts, and the Association of Immunization Managers (AIM). ISD and POB recognize that each year grantees are asked to implement additional vaccines with fewer resources. It is unrealistic to expect grantees to be able to implement all the activities that were included in the 2003 IPOM. Therefore, under each bolded program requirement are supporting activities that are sub-prioritized as either required or recommended according to CDC priorities. The purpose of this new format is to ensure that grantees' use of limited 317 and VFC FA operations funds is directed toward implementing activities of highest priority to CDC.
Activities are coded with check marks (✓) for high priority; pointer fingers (☞) for requirements by statute; and stars (☆) for association with raising immunization coverage.	Because activities are categorized under each program requirement as either required or recommended, the coding (☞☆✓) is eliminated.

2003 IPOM	2008-2012 IPOM
There are appendices and attachments.	The appendices are eliminated. The reference list within each chapter is expanded, and attachments are included within the specific chapters, where applicable.
No updates were made once the IPOM was printed.	Updates to chapters will occur as needed. CDC will notify grantees by email when a chapter has been updated. The most current chapters are available online at http://www.cdc.gov/vaccines/vac-gen/policies/ipom/ .

A key similarity between the 2003 IPOM and the 2008-2012 IPOM in the layout of each chapter is the existence of an overview and reference list. In addition, some supporting activities include performance measures, which are measures of the degree of success in achieving planned program activities.

Although the 2008-2012 IPOM is intended to be comprehensive, it is not an all-inclusive guide to immunization program content. The editors and contributors depend upon the grantees' feedback to improve, update, and expand upon the content and format in future editions. Grantees are encouraged to send their comments on the 2008-2012 IPOM to their project officers.

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