

Increasing Appropriate Vaccinations: Community-Based Interventions Implemented in Combination

Summary Evidence Table - Effectiveness Review

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Barnes, et al. (1999)</p> <p>Study Period: 1995-1996</p> <p>Design Suitability (design): Greatest suitability (individual RCT)</p> <p>Quality of Execution: Fair (2 limitations)</p> <p>Outcome Measurement: Childhood series</p>		<p>Setting: 2 pediatric ambulatory clinics</p> <p>- Children younger than 2 yrs of age residing in northwestern Manhattan who were immunization deficient by clinic chart and missed an appointment</p> <p>N=434 children eligible N= 163 were randomized</p>	<p>Proportion of children UTD immunizations for the childhood series</p>	<p>(I) 24 (34%) of 71</p> <p>(C) 33 (39%) of 84</p>	<p>(I) 42 (75%) of 56</p> <p>(C) 41 (54%) of 76</p>	<p>+26 pct pts [95%CI 11, 41]</p>	<p>Intervention period was 6 months</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Bond, et al. (1998)</p> <p>Study Period: 1996</p> <p>Design Suitability (design): Greatest suitability (Randomized trial)</p> <p>Quality of Execution: Fair</p> <p>Outcome Measurement: DTP/OPV/MMR/Hib</p>	<p>Location: Australia</p> <p>Intervention: Letter, telephone, and home contact including administration of vaccination</p> <p>Comparison: Usual care</p>	<p>Study Population: - community wide - clients - aged 9 or 16 months identified from Australian childhood immunization registry</p> <p>N=2,194</p> <p>204 and 202 not-up-to-date randomized to intervention and control</p>	<p>4 DTP/OPV/Hib at 9 months or 1 MMR at 16 months</p> <p>Group Intervention vs Comparison</p>	<p>Intervention: 94%</p>		+1 pct pts	
<p>Author (Year): Dalby, et al. (2000)</p> <p>Study Period: NR</p> <p>Design Suitability (design): Greatest Suitability (individual RCT)</p> <p>Quality of Execution: Fair (3 limitations)</p> <p>Outcome Measurement: Influenza pneumonia vaccines</p>	<p>Location: Canada; Hamilton, Ontario Georgia</p> <p>Intervention: preventive home visits "as needed" over 14 months to provide vaccinations, implement care plan based on comprehensive assessment of cognitive, physical, social and emotional functions. - deliverers: visiting primary care nurse</p> <p>Comparison: usual care (not described)</p>	<p>Study Population: 113 adults over 70, from 2 primary care practices, frail elderly living in community but at high risk for rapid deterioration b/c of recent (within past 6 months) functional impairment, hospital admission, or bereavement</p>	<p>Proportion of participants administered influenza and pneumonia vaccines by nurse during home visits</p>	<p><u>Influenza:</u> Comparison: 29 (53.0%) of 54</p> <p><u>Pneumonia vaccine:</u> Comparison: 0 (0%) of 54</p>	<p><u>Influenza Intervention:</u> 53 (90.1%) of 59</p> <p><u>Pneumonia vaccine Intervention:</u> 31 (53.0%) of 59</p>	<p><u>Influenza</u> Pct pt change=37.1 95%CI (21.8, 52.4) P<.001</p> <p><u>Pneumonia</u> Pct pt change=53.0 95% CI (40.3, 65.7) P<.001</p>	<p>Intervention period was 14 months</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time								
<p>Author (Year): Daniels, et al.</p> <p>Study Period: 2007 (2003-2006)</p> <p>Design Suitability (design): Greatest suitability (RCT)</p> <p>Quality of Execution: Fair (2 limitations)</p> <p>Outcome Measurement: Influenza PPV</p>	<p>Location: USA; San Francisco Bay area, CA</p> <p>Intervention: Client education + Enhanced access</p> <p>Comparison: Client education (informational pamphlets, church-based education, reminders, watched slideshow on vaccinations)</p>	<p>Setting: 15 churches</p> <p>Adults ≥65 years of age - no previous PPV vaccination - no regular receipt of influenza</p> <table border="1"> <thead> <tr> <th></th> <th>N</th> </tr> </thead> <tbody> <tr> <td>Intervention</td> <td>113</td> </tr> <tr> <td>Control</td> <td>73</td> </tr> <tr> <td>Total</td> <td>186</td> </tr> </tbody> </table>		N	Intervention	113	Control	73	Total	186	<p>Proportion of adults receiving influenza vaccination</p> <p>Proportion of adults receiving PPV vaccination</p>	<p><u>Influenza</u> (I) 0(0%) of 113 (C) 0(0%) of 73</p> <p><u>PPV</u> (I) 0(0%) of 113 (C) 0(0%) of 73</p>	<p><u>Influenza</u> (I) 90 (80%)/112 (C) 32 (46%) of 70</p> <p><u>PPV</u> (I) 58 (66%) of 88 (C) 20 (35%) of 57</p>	<p><u>Influenza</u> +34 pct pts [95% CI: 20, 48]</p> <p><u>PPV</u> +31 pct pts [95% CI: 15, 37]</p>	<p>Intervention period was 3-6 months</p>
	N														
Intervention	113														
Control	73														
Total	186														
<p>Author (Year): Etkind, et al. (1996)</p> <p>Study Period: 1988-1992</p> <p>Design Suitability (design): Greatest suitability (Nonrandomized trial)</p> <p>Quality of Execution: Fair</p> <p>Outcome Measurement: Influenza</p>	<p>Location: USA; Essex and Worcester Counties, Massachusetts</p> <p>Intervention: Multiple approaches to promoting influenza vaccination to target population plus provider education plus administration fee to providers (91,621 Medicare Part B enrollees) versus</p> <p>Baseline in intervention county (number not provided)</p> <p>Comparison: versus Usual practice in comparison county (95,234 Medicare Part B enrollees)</p>	<p>Communitywide; Essex county target population - 90% urban; aged >65 years; predominantly white; socioeconomic status not reported</p> <p>Sample size: entire county</p>	<p>Proportion of intervention county receiving influenza vaccination</p>	<p>Essex County baseline: 25%</p>	<p>Intervention versus Comparison county: doses distributed in Essex County increased from ~25,000/year before to ~57,400/year after versus no change in comparison county</p>	<p>Intervention versus Intervention Co. at baseline = 29% change (statistical significance not provided)</p>	<p>4 years</p>								

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Findley, et al. (2008; 2009)</p> <p>Study Period: 2006-2007</p> <p>Design Suitability (design): Moderate suitability (Retrospective cohort)</p> <p>Quality of Execution: Fair (4 limitations)</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; New York City, NY</p> <p>Intervention: (Start Right) Client education + client reminder/recall + IIS/DB + client incentives + PAF</p> <p>Comparison: usual care</p>	<p>Setting: inner city</p> <p>Study population: Children - 19-35 mths of age - born between 4/99-9/03 at primary community hospital N=895 Start Right participants</p>	<p>Proportion of children UTD immunizations for the childhood series</p>	<p>Intervention: 63%</p>		<p>+ 11.1 pct. pts. (95% CI: NR)</p>	<p>Intervention period was 2 years</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time									
<p>Author (Year): LeBaron, et al. (1998)</p> <p>Study Period: 1992-1993</p> <p>Design Suitability (design): Greatest Suitability (Group non-randomized trial)</p> <p>Quality of Execution: Fair (3 limitations)</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; Atlanta, GA</p> <p>Intervention: (Residence-based intervention study)</p> <p>Incentives (food and baby products) + Outreach+ Reducing Out-of-Pocket Costs+ Community-wide Education+ Enhanced Access</p> <p>Comparison: Usual care</p>	<p>Setting: Community-wide</p> <p>Study Population: Study intervention communities -5 intervention -4 comparison</p> <p>Children of surveyed households - 3-59 months of age</p> <table border="1" data-bbox="674 625 1016 714"> <thead> <tr> <th><u>Group</u></th> <th><u>1992</u></th> <th><u>1993</u></th> </tr> </thead> <tbody> <tr> <td>Inter</td> <td>347</td> <td>429</td> </tr> <tr> <td>Ctrl</td> <td>178</td> <td>221</td> </tr> </tbody> </table>	<u>Group</u>	<u>1992</u>	<u>1993</u>	Inter	347	429	Ctrl	178	221	<p>Age-appropriate vaccination rates</p>	<p><u>Intervention 1992</u> 154(44%) out of 347</p> <p><u>Comparison 1992</u> 78(44%) out of 178</p>	<p><u>Intervention 1993</u> 269 (61%) out of 429</p> <p><u>Comparison 1993</u> 129 (58%) out of 221</p>	<p>+ 3 pct pts 95% CI: [-5, 11]</p>	<p>Intervention period was 1 year</p>
<u>Group</u>	<u>1992</u>	<u>1993</u>														
Inter	347	429														
Ctrl	178	221														

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time						
<p>Author (Year): LeBaron, et al. (2004)</p> <p>Study Period: September 1996–February 2001</p> <p>Design Suitability (design): Greatest Suitability (individual RCT)</p> <p>Quality of Execution: Fair (3 limitations)</p> <p>Outcome Measurement: Childhood series Economic information</p>	<p>Location: USA; Fulton Co., GA (most of inner city Atlanta)</p> <p>Intervention Arm 1: "Consolidated"=registry and Outreach [in-person telephone, mail or home visit recall] and Combination group [auto-dialer + Outreach]</p> <p>Arm 2: Auto-dialer (client reminder/recall + registry)</p> <p>- Deliverers: trained nonmedical outreach workers</p> <p>Comparison: Usual care (registry)</p>	<p>Evaluation of the impact of large-scale registry-based CRR/outreach/home visit intervention on UTD at 24 months</p> <p>Children born July 1995-August 1996 who had received public sector health services and were identified in MATCH registry</p> <p>Eligible patients N=3050 children</p> <table border="0" data-bbox="674 738 1016 828"> <tr> <td><u>Group</u></td> <td><u>N</u></td> </tr> <tr> <td>Intervention</td> <td>1524</td> </tr> <tr> <td>Comparison</td> <td>763</td> </tr> </table>	<u>Group</u>	<u>N</u>	Intervention	1524	Comparison	763	<p>Proportion of children UTD at 24 months</p> <p>"Consolidated" vs. Comparison</p>	<p>Comparison 259 (34%) of 763</p>	<p>Arm 1: 760 (37.5%) of 1524</p> <p>Arm 2: 306 (40%) of 763</p>	<p>Arm 1: +3.5 pct pts 95% CI= [-.6, +7.6]</p> <p>Arm 2: 6 pct. pts. 95% CI 1.2, 10.8</p>	<p>Intervention period was 24 months</p>
<u>Group</u>	<u>N</u>												
Intervention	1524												
Comparison	763												

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time						
<p>Author (Year): Lemstra, et al. (2011)</p> <p>Study Period: 2007-2008</p> <p>Design Suitability (design): Greatest Suitability (G-RCT)</p> <p>Quality of Execution: 1 limitation</p> <p>Outcome Measurement: MMR</p>	<p>Location: Canada; Saskatoon Health Region</p> <p>Intervention: Home visits + Client reminder/recall + MIMS (database)</p> <p>Comparison: Client reminder/recall</p>	<p>Study Population: -2 year olds not UTD with MMR vaccination -Subset lived in low-income neighborhoods N=257</p> <table border="1" data-bbox="674 451 1016 537"> <thead> <tr> <th>Group</th> <th>N</th> </tr> </thead> <tbody> <tr> <td>Intervention</td> <td>142</td> </tr> <tr> <td>Comparison</td> <td>115</td> </tr> </tbody> </table>	Group	N	Intervention	142	Comparison	115	<p>Proportion of children UTD MMR vaccination</p>	<p><u>Comparison</u> 56 (48.7%) of 115</p>	<p><u>Intervention</u> 86 (60.5%) of 142</p>	<p>+11.8 pct pts 95% CI: [-0.4, +24]</p>	<p>1 year</p>
Group	N												
Intervention	142												
Comparison	115												

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time									
<p>Author (Year): McPhee, et al. (2003)</p> <p>Study Period: 1998-2000</p> <p>Design Suitability (design): Greatest (Group nonrandomized trial)</p> <p>Quality of Execution: Fair (3 limitations)</p> <p>Outcome Measurement: Hepatitis B series</p>	<p>Location: USA; Dallas TX, compared to Washington DC</p> <p>Intervention: Dallas Community-wide education: Community mobilization (coalition with neighborhood and community activities and events) + small media + provider education + home visits to newly immigrated Vietnamese refugees</p> <p>Comparison: Washington area Usual care (no community-wide education)</p>	<p>Setting: Vietnamese-American communities</p> <p>Telephone survey participants (parents) in study communities</p> <p><u>Survey All communities</u> Pre 1508 (93%) of 1624 Post 1547 (92.5%) of 1673</p> <p>Record retrieval (child) among survey participants (parent or provider) Overall Pre 783 (52%) of 1508 Post 784 (51%) of 1547 (all communities includes a Houston arm not included in this review)</p> <p style="text-align: center;"><u>Children with record</u></p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>Site</th> <th>Pre</th> <th>Post</th> </tr> </thead> <tbody> <tr> <td>Dallas</td> <td>307</td> <td>225</td> </tr> <tr> <td>D.C.</td> <td>243</td> <td>244</td> </tr> </tbody> </table>	Site	Pre	Post	Dallas	307	225	D.C.	243	244	<p>Proportion of children with parent or provider record verified completion of 3 dose vaccination series for hepatitis B</p> <p>Multiple logistic regression analyses for the odds of receipt of 3 dose series by location (compared to D.C.)</p>	<p><u>Dallas</u> 82 (26.6%) of 307</p> <p><u>D.C.</u> 92 (37.8%) out of 243</p>	<p><u>Dallas</u> 87 (38.8%) of 225</p> <p><u>D.C.</u> 92 (37.8%) out of 243</p>	<p>Adjusted change <u>Dallas vs D.C.</u></p> <p>+ 12.2 pct pts [95%CI : +4.6, +28.2] p=0.01 OR 2.15 [95%CI 1.2,3.9]</p>	<p>Dallas 3 years</p>
Site	Pre	Post														
Dallas	307	225														
D.C.	243	244														

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Ohmit, et al. (1995)</p> <p>Study Period: 1989-1991</p> <p>Design Suitability (design): Moderate suitability (Time-series study)</p> <p>Quality of Execution: Fair</p> <p>Outcome Measurement: Influenza</p>	<p>Location: USA; Southwest Michigan</p> <p>Intervention: Communitywide education of physicians and clients plus free vaccination plus mailed postcard client reminders plus outreach in senior centers</p> <p>Comparison: Prior usual care (client numbers not given) (Number in whom baseline was assessed not given)</p>	<p>Communitywide; clinics/offices target population - >65 years; otherwise, incompletely described</p> <p>Evaluation in 1,315 participants in 1990-91 and 1,663 in 1991-92)</p>	<p>Influenza vaccination among an elderly population</p>	<p>1989-1990 : 40 %</p>	<p>1991-1992 56%</p>	<p>Influenza, Intervention versus Comparison = 16% change (statistical significance not found)</p>	<p>3 years</p>
<p>Author (Year): Paunio, et al. (1991)</p> <p>Study Period: 1982-1986</p> <p>Design Suitability (design): Moderate suitability (Time-series study)</p> <p>Quality of Execution: Fair</p> <p>Outcome Measurement: MMR</p>	<p>Location: Finland</p> <p>Intervention: Registry plus mass-media reporting of local data regarding vaccination coverage plus provider reminders plus parent reminders</p> <p>Comparison: Usual care before registry</p>	<p>Children aged birth through 11 years in Finland N=138,861 at baseline with 121,324 (87.4%) already vaccinated</p> <p>Interventions implemented in the third year of a national vaccination program (further confounded by a polio outbreak and vaccination effort in 1985)</p>	<p>Number of children who received MMR vaccination for the first time</p> <p>14-18 month olds</p> <p>6 year olds</p>	<p>(89.3%)</p> <p>(83.9%)</p>		<p>MMR, Intervention versus Comparison = 8% change (no significance testing)</p>	<p>4 years</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Rodewald, et al. (1999)</p> <p>Design Suitability (design): Greatest suitability (Group RCT)</p> <p>Quality of Execution: Arm1: Good (Provider intervention alone: Fair)</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; Rochester, New York</p> <p>Arm 1: Client reminder recall, outreach and tracking, home visits</p> <p>Arm 2: Provider assessment with feedback, provider education, provider reminders, client reminder recall, outreach and tracking, home visits</p> <p>Comparison: No intervention</p>	<p>Setting: 9 primary care sites serving impoverished and middle class children</p> <p>N = 3015 children</p> <p>Arm 1: 630</p> <p>Arm 2: 648</p>	<p>Number & percent "up to date" for age-appropriate series completion</p>	<p>Arm 1: 81%</p> <p>Arm 2: 85 %</p> <p>Comparison: 81%</p>	<p>Arm 1: 95%</p> <p>Arm 2: 95%</p> <p>Comparison: 74%</p>	<p>Arm 1: +21 pct pts (95% CI 17, 25)</p> <p>Arm 2: +17 pct pts (95% CI 13,21)</p>	<p>18 months</p>
<p>Author (Year): Stevens-Simon, et al. (2001)</p> <p>Study Period: NR</p> <p>Design Suitability (design): Greatest suitability (Individual randomized trial)</p> <p>Quality of Execution: Fair (2 limitations)</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; Denver CO</p> <p>Intervention: "health passport" including info re maternal and infant healthcare needs (e.g., vaccinations), accident prevention, child development. Plus client reminders (scheduled well-baby appt). Note: at each appt, passport was completed, returned to client with copies for provider and program administrator.</p> <p>Comparison: no passport. Note: both groups enrolled in comprehensive adolescent maternity program.</p>	<p>Setting: Colorado Adolescent Maternity Program (CAMP) at U. of Colorado Health Sciences Center</p> <p>Study population: CAMP participants N=188 consecutively delivered infants and their mothers N=71 mother-infants randomized to Intervention Group</p> <p>Total sample characteristics:</p> <p>Mean age 17.6 y o</p> <p>% on Medicaid: 92.0</p> <p>% White: 45.0</p> <p>% Black 32.0</p> <p>% Hispanic 21.0</p>	<p>N (%) of infants under-immunized at 9 months of age</p>	<p>I 0%</p> <p>C 0%</p>	<p>I (n=43) 9.0%</p> <p>C (n=78) 9.0%</p> <p>Note: missing data, N=121; 43 in I, 78 in C</p>	<p>[0] pct pts</p>	<p>Intervention period was 9 months</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Szilagyi, et al. (2002)</p> <p>Study Period: 1994-1999</p> <p>Design Suitability (design): Greatest suitability (other w/ concurrent comparison)</p> <p>Quality of Execution: Fair (4 limitations)</p> <p>Outcome measurement: Childhood series</p>	<p>Location: USA; Monroe County (Rochester) NY</p> <p>Intervention: immunization data base + “staged” city-wide CRR/outreach/home visit - Deliverers: lay outreach workers assigned to primary care practices</p> <p>Comparison: Suburbs (data base)</p>	<p>Evaluation of intervention impact on disparities in childhood immunization rates by region (urban vs. suburban) and among blacks, whites, and Hispanics.</p> <p>Setting: 10 large primary care practices</p> <p>Study Population: Children 2 y or younger</p> <p>Region: N/% birth cohort</p> <p>Inner city 1653 (74%)</p> <p>Rest of city 938 (61%)</p> <p>Suburbs 598 (9%)</p>	<p>Proportion of children UTD at 12 and 24 months</p> <p>Inner city vs. suburbs</p> <p>Rest of city vs. suburbs</p>	<p>Baseline: 67% of inner city 79% of rest of city</p> <p>88% of suburbs</p>	<p><u>At 24 months:</u> 84% of inner city 81% of rest of city 88%</p>	<p><u>At 24 months:</u> Inner city vs. suburbs Difference= +14 pct pts Inner city vs. suburbs Difference=+3 pct pts</p>	<p>Intervention period was 24 months</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Vora, et al. (2009)</p> <p>Study Period: 2004-2005</p> <p>Design Suitability (design): Greatest suitability (other w/ concurrent comparison group)</p> <p>Quality of Execution: Fair (3 limitations)</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; south side of Chicago, IL</p> <p>Intervention: Client education + client reminder/recall + home visits + (tracking)</p> <p>Comparison: usual care (historical control)</p>	<p>Setting: Hospitals</p> <p>1st study-received well-child care and immz at the FFHC</p> <p>2nd study-any clinics in a defined zip code</p> <p>Study population: Children</p> <ul style="list-style-type: none"> - 19-35 mths of age - born at University of Chicago <p>N=400 neonates enrolled n= 146 children completed program</p>	<p>Proportion of children UTD immunizations for the childhood series (at 24 months)</p>	<p>(I) 0% (C) 0%</p>	<p>(I) 91% (C) 49%</p>	<p>+42 pct pts Unable to calculate 95% CI</p>	<p>Intervention period was 1 year</p>
<p>Author (Year): Wood, et al. (1998)</p> <p>Study Period: 1994</p> <p>Design Suitability (design): Greatest suitability (Randomized trial)</p> <p>Quality of Execution: Good</p> <p>Outcome Measurement: DTP/OPV/Hib</p>	<p>Location: USA; Los Angeles, California (10 ZIP codes)</p> <p>Intervention: Case management with home visits and telephone contact prior to age 6 weeks and before each vaccination appointment, <i>plus</i> health passport <i>versus</i></p> <p>Comparison: Health passport only</p>	<p>Setting: homes and clinics</p> <p>Study Population:</p> <ul style="list-style-type: none"> - clients - aged <15 months - 90% urban - 100% black - low socioeconomic status <p>N= 419 participants</p>	<p>DTP/OPV/Hib (3:2:3 doses, respectively) at 12 months</p> <p>Group Intervention vs comparison</p>	<p>Comparison: 51%</p>	<p>Intervention: 64%</p>	<p>13% change (p = 0.01)</p>	<p>1 year</p>

Study	Intervention Characteristics	Population & Sample Size	Effect Measure	Reported Baseline	Reported Effect	Value Used in Summary [95%CI]	Follow-Up Time
<p>Author (Year): Yokley, et al. (1984)</p> <p>Study Period: NR</p> <p>Design Suitability (design): Greatest suitability (Group randomized trial)</p> <p>Quality of Execution: Fair</p> <p>Outcome Measurement: Childhood series</p>	<p>Location: USA; Akron, Ohio</p> <p>Intervention arm 1: Mailed specific client reminder plus parent incentive lottery (183)</p> <p>Intervention arm 2: Mailed specific client reminder plus special off hours clinics (185)</p> <p>Comparison: usual care (191)</p>	<p>Setting: public health clinic</p> <p>Study Population: Study public health clinic: N=1 Underimmunized preschool aged children or the study public health clinic</p> <p>N=1133 (53.9% of all children in clinic) randomly assigned to one of 5 conditions</p>	<p>Vaccinated with at least 1 antigen after 3 months</p>	<p><u>Arm 1:</u> 3%</p> <p><u>Arm 2:</u> 4%</p>		<p>Arm 1 = 18 pct pts. (95% CI 8, 27)</p> <p>Arm 2: 16 pct pts. (significant)</p>	<p>3 months</p>

The data presented here are preliminary and are subject to change as the systematic review goes through the scientific peer review process.