STANDING ORDERS FOR
Administering Measles, Mumps, and Rubella Vaccine to Adults

Purpose

To reduce morbidity and mortality from measles, mumps, and rubella disease by vaccinating all adults who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices.

Policy

Where allowed by state law, standing orders enable eligible nurses and other healthcare professionals (e.g., pharmacists) to assess the need for vaccination and to vaccinate adults who meet any of the criteria below.

Procedure

1 Assess Adults for Need of Measles, Mumps, and Rubella (MMR) Vaccination

a Identify adults **in need of initial MMR vaccination** who

- were born in the U.S. in 1957 or later, or
- are a healthcare worker of any age, and who do not meet evidence of immunity by having met any of the following criteria:
  - Documentation of receiving at least 1 dose of MMR vaccine
  - Laboratory evidence of immunity or laboratory confirmation of disease to measles, mumps, and rubella

b Identify adults **in need of a second dose of MMR vaccine** who

- were born U.S. in 1957 or later and are planning to travel internationally,
- are a student in a college, university, technical, or vocational school, or
- are a healthcare worker born before 1957 at potential risk of infection from a current mumps outbreak.

2 Screen for Contraindications and Precautions

Contraindications

- Do not give MMR vaccine to a person who has experienced a severe allergic reaction (e.g., anaphylaxis) after a previous dose of MMR vaccine or to any of its components. For a list of vaccine components, refer to the manufacturer's package insert (www.immunize.org/packageinserts) or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
- Do not give MMR vaccine to a woman who is pregnant or may become pregnant within 1 month (pregnant women should be vaccinated upon completion or termination of pregnancy).
- Do not give MMR vaccine to a person having known severe immunodeficiency (e.g., from hematologic and solid tumors, receipt of chemotherapy, congenital immunodeficiency, long-term immunosuppressive therapy).
- Do not give MMR vaccine to a person receiving high-dose systemic immunosuppressive therapy (e.g., two weeks or more of daily receipt of 20 mg or more [or 2 mg/kg body weight or more] of prednisone or equivalent).
- Do not give MMR vaccine to an adult with human immunodeficiency virus (HIV) infection and CD4+ T-lymphocytes count <200 cells/µL. *(HIV infection is not a contraindication to MMR for adults who are not severely immunocompromised [i.e., CD4+ T-lymphocyte counts ≥200 cells/µL for 6 months or more.])*

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Technical content reviewed by the Centers for Disease Control and Prevention

IMMUNIZATION ACTION COALITION Saint Paul, Minnesota ▪ 651-647-9009 ▪ www.immunize.org ▪ www.vaccineinformation.org
www.immunize.org/catg.d/p3079.pdf ▪ Item #P3079 (6/17)

Precautions

- Moderate or severe acute illness with or without fever
- History of recent (within the past 11 months) receipt of antibody-containing blood product (specific interval depends on product)
- History of thrombocytopenia or thrombocytopenic purpura
- Need for tuberculin skin testing or interferon-gamma release assay (IGRA) testing. If active tuberculosis is suspected, MMR should be delayed. Measles vaccination might suppress tuberculin reactivity temporarily. Measles-containing vaccine can be administered on the same day as tuberculin skin testing, or should be postponed for at least 4 weeks after the vaccination.

3 Provide Vaccine Information Statements

Provide all patients with a copy of the most current federal Vaccine Information Statement (VIS). Provide non-English speaking patients with a copy of the VIS in their native language, if one is available and desired; these can be found at www.immunize.org/vis. (For information about how to document that the VIS was given, see section 6 titled "Document Vaccination.")

4 Prepare to Administer Vaccine

Choose the needle gauge, needle length, and injection site according to the following chart:

NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
23–25	5/8"	Fatty tissue over triceps

Reconstitute the vaccine with the manufacturer-supplied diluent just prior to administration.

5 Administer MMR Vaccine, 0.5 mL, via the subcutaneous (Subcut) route, according to the following criteria and schedule:

HISTORY OF PREVIOUS MMR VACCINATION	DOSE AND SCHEDULE FOR ADMINISTRATION OF MMR
0 documented doses, or none known	Give 0.5 mL MMR as dose #1. If indicated, give dose #2 at least 4 weeks later.
1 previous dose of MMR	If indicated, give 0.5 mL MMR as dose #2 at least 4 weeks after dose #1.

6 Document Vaccination

Document each patient's vaccine administration information and follow up in the following places:

Medical record: Document the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and title of the person administering the vaccine. You must also document, in the patient's medical record or office log, the publication date of the VIS and the date it was given to the patient. Note that medical records/charts should be documented and retained in accordance with applicable state laws and regulatons. If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal). Reoffer this vaccine at the next visit.

Personal immunization record card: Record the date of vaccination and the name/location of the administering clinic.

Immunization Information System (IIS) or "registry": Report the vaccination to the appropriate state/local IIS, if available.

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7 Be Prepared to Manage Medical Emergencies

Be prepared for management of a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications. For IAC's "Medical Management of Vaccine Reactions in Adults," go to www.immunize.org/catg.d/p3082.pdf. For "Medical Management of Vaccine Reactions in Children and Teens," go to www.immunize.org/catg.d/p3082a.pdf. To prevent syncope, vaccinate patients while they are seated or lying down and consider observing them for 15 minutes after receipt of the vaccine.

8 Report All Adverse Events to VAERS

Report all adverse events following the administration of MMR vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov. Forms are available on the website or by calling (800) 822-7967.

Standing Orders Authorization

This policy and procedure shall remain in effect for all patients of the _____ (NAME OF PRACTICE OR CLINIC)

effective _____ (DATE) until rescinded or until _____ (DATE).

Medical Director _____ (PRINT NAME) / _____ (SIGNATURE) _____ (DATE)