
Standing Orders for Administering *Haemophilus influenzae* Type B Vaccine to Adults

Purpose: To reduce morbidity and mortality from *Haemophilus influenzae* type b 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: Under these standing orders, eligible nurses and other healthcare professionals (e.g., pharmacists), where allowed by state law, may vaccinate adults who meet any of the criteria below.

Procedure

1. Identify adults in need of vaccination against *Haemophilus influenzae* type b (Hib) based on the following criteria:
 - a. Diagnosis of anatomic or functional asplenia (e.g., sickle cell disease, elective splenectomy) and no prior documented history of Hib vaccination
 - b. Recipient of hematopoietic stem cell transplant (HSCT)
2. Screen all patients for contraindications and precautions to Hib vaccine:
 - a. **Contraindications:** a history of a severe allergic reaction (e.g., anaphylaxis) after a previous dose of Hib vaccine or to a Hib vaccine component. For a list of vaccine components, go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf.
 - b. **Precautions:** moderate or severe acute illness with or without fever
3. Provide all patients with a copy of the most current federal Vaccine Information Statement (VIS). You must 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. Provide non-English speaking patients with a copy of the VIS in their native language, if available and preferred; these can be found at www.immunize.org/vis.
4. Administer 0.5 mL Hib vaccine via the intramuscular route (22–25g, 1–1½" needle) in the deltoid muscle. For patients identified in 1.a. above, administer a 1-time dose. For patients identified in 1.b. above, administer a 3-dose series 6 to 12 months after a successful transplant, regardless of vaccination history. Separate the doses by at least 4 weeks between the doses. (Note: A 5/8" needle may be used for patients who weigh less than 130 lbs [60 kg] for injection in the deltoid muscle *only* if the subcutaneous tissue is not bunched and the injection is made at a 90 degree angle.)
5. Document each patient’s vaccine administration information and follow up in the following places:
 - a. **Medical chart:** Record 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. If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal).
 - b. **Personal immunization record card:** Record the date of vaccination and the name/location of the administering clinic.
6. 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 Adult Patients,” go to <http://www.immunize.org/catg.d/p3082.pdf>.
7. Report all adverse reactions following the administration of Hib vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or by calling (800) 822-7967. VAERS report forms are available at www.vaers.hhs.gov.

This policy and procedure shall remain in effect for all patients of the _____ until rescinded or until _____ (date). (name of practice or clinic)

Medical Director’s signature: _____ Effective date: _____