

Standing Orders for Administering *Haemophilus influenzae* type b Vaccine to Children

Purpose: To reduce morbidity and mortality from *Haemophilus influenzae* type b disease by vaccinating all children 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 children who meet any of the criteria below.

Procedure

- Identify infants and children ages 6 weeks through 59 months in need of vaccination against *Haemophilus influenzae* type b based on the following criteria:
 - age 6 weeks through 14 months without vaccination or with an incomplete primary series of *Haemophilus influenzae* type b (Hib) vaccine
 - age 15 months through 59 months without evidence of receiving a dose of Hib vaccine since his or her 1st birthday
- Screen all patients for contraindications and precautions to Hib vaccine:
 - Contraindications:** a history of a serious 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.
 - Precautions:** moderate or severe acute illness with or without fever
- Provide all patients (parent/legal representative) 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 (parent/legal representative). Provide non-English speaking patients with a copy of the VIS in their native language, if available; these can be found at www.immunize.org/vis.
- Provide routine vaccination with Hib vaccine at ages 2 months, 4 months, 6 months*, and 12–15 months. Administer 0.5 mL Hib vaccine intramuscularly in the vastus lateralis for infants (or for toddlers lacking adequate deltoid mass) or in the deltoid muscle (for toddlers and older children). Use a 22–25 g needle. Choose needle length appropriate to the child’s age and body mass: infants younger than 12 mos: 1"; 12 mos–5 yrs: 1–1½".
- For children who have not received Hib vaccine at the ages specified in #4, give one dose at the earliest opportunity and then schedule subsequent doses by observing the following minimum intervals:

For Children Who Have Fallen Behind: Minimum Intervals Permissible Between Doses of Hib Vaccine (Source: www.cdc.gov/vaccines/recs/schedules)		
Interval between dose 1 and dose 2	Interval between dose 2 and dose 3	Interval between dose 3 and dose 4
4 weeks if first dose given at age younger than 12 mos 8 weeks (as final dose) if first dose given at age 12–14 mos No further doses needed if first dose given at age 15 mos or older	4 weeks* if current age younger than 12 mos 8 weeks (as final dose)* if current age 12 mos or older and second dose given at age younger than 15 mos No further doses needed if previous dose given at age 15 mos or older	8 weeks (as final dose) only necessary for children ages 12 mos–5 yrs who received 3 doses before age 12 mos

*If child’s current age is younger than 12 months and the first 2 doses were PRP-OMP (PedvaxHIB® or Comvax® [Merck]), the third (and final) dose should be administered at age 12–15 months and at least 8 weeks after the second dose.

- Document each patient’s vaccine administration information and follow up in the following places:
 - 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 given, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal).
 - Personal immunization record card:** Record the date of vaccination and the name/location of the administering clinic.
- 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.
- Report all adverse reactions to 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: _____