STEP 2: Setting Up for Vaccination Services

If we could send out a prefabricated “vaccination station” filled with inventory that you could simply install in your practice, we would. This chapter is the next best thing. It provides information in one location about many of the details you should know. What you learn will help prepare your facility and your personnel for the preventive healthcare service you will soon be providing or enhancing.

Following this chapter’s guidance will save you time and help you plan. Most of the supplies you will need come from just a few sources. You will have to decide who will place orders, where the new supplies will be stored, who will use and maintain what, and when your setting will be ready to begin vaccinating. To keep things in perspective, remember: you are simply adding a new and important service, not revamping or restructuring your entire workplace.

Obtain support and cooperation from clinic staff and management

Integrating a new activity into an already busy set of responsibilities can be challenging. You know it’s the right thing to do, but you may need to convince others in your healthcare setting. It is critical that you obtain support from the management of your facility. You should take the time you need to ensure everyone on your staff is comfortable with and supportive of this new activity. A combination of meetings and follow-up written communications can be effective in gaining support and making certain

---

**Step-by-Step: Setting Up Tasks**

- Obtain support and cooperation from clinic staff and management
- Seek out community resources
- Assign a vaccination coordinator and a back-up for that person
- Plan workflow and workspace
- Determine how and where vaccines will be stored, and purchase appropriate vaccine storage and temperature monitoring equipment
- Purchase vaccine administration supplies
- Purchase emergency response supplies
- Determine who can provide vaccinations in your setting
- Arrange for staff training
- Organize vaccination paperwork and reference materials
- Create standing orders documents for times when a supervising clinician is not available to write orders
- Order vaccines – Yes, do this last!

You should take the time you need to ensure everyone on your staff is comfortable with and supportive of this new activity.
everyone gets the same information. Frontline staff, both medical and clerical, will likely be the most heavily affected. They will need to receive positive reinforcement that vaccination is a worthwhile and important service. As soon as possible, representatives from each group (management, financial, insurance, medical, nursing, clerical, etc.) should become involved in working meetings to discuss the following issues:

- How can you set up a system that ensures all patients or clients are assessed and offered appropriate vaccines?
- Will vaccines be offered every day or only during designated times? Will evening vaccination times be available?
- Can patients come in for vaccination only?
- What paperwork or electronic record system is necessary for this activity?
- How will patient tracking be done?
- Who is responsible for monitoring the temperatures in vaccine storage units?
- Who will be responsible for management of inventory and ordering vaccines and supplies?
- How and by whom will reimbursement for vaccination services be obtained?

Seek out community resources

Once you have a basic idea of how you’d like vaccine services to be conducted in your healthcare setting, it’s time to seek out expertise from others within your setting or from outside sources. If you’re part of a medical facility, you can learn from those who are already involved in routine vaccination delivery (e.g., pediatricians, family physicians, internists, nurse clinicians, and, of course, the nurses who work with them). If you’re not part of an organization with experienced vaccinators available to help you, contact staff at your local or state health department. A list of their key immunization program personnel is available at www.immunize.org/coordinators.

Assign a vaccination coordinator and a back-up for that person

Most likely, you will not need to hire new staff to set up or administer your vaccination program. But it is critical to designate someone as the vaccination coordinator. It also is important to assign someone to be the back-up person to this coordinator.

It is critical to designate someone as the vaccination coordinator. It also is important to assign someone to be the back-up person to this coordinator. The coordinator’s responsibilities might include ordering and maintaining an inventory of vaccines, syringes, and other supplies; developing or acquiring screening checklists, procedural guidelines, and other protocols for vaccinators and assuring competence of staff; ensuring proper storage and handling of the vaccine; monitoring compliance with several recordkeeping requirements; and evaluating the program. Both the vaccination coordinator and the back-up person can get help with these tasks by reviewing the Guide and working with your organization’s medical director.
Plan workflow and workspace

Decide in advance where the vaccinations will actually take place. If you do not plan to use exam rooms, plan for a waiting area and a vaccination area. Make sure there is good lighting, ventilation, and a sink for handwashing. Consider where you will prepare and fill the syringes with vaccine. Make certain that there is adequate space to place sharps containers for used needles close to the location where the vaccinations will be administered. Is there space for an additional refrigerator and freezer unit if needed? Are there cabinets or shelves for storing everything from needles to alcohol wipes? What about shelf space and slots or trays for forms, informational materials, and record cards? How will data entry be handled? If it is conducted in an exam room, you may need to factor in space for data entry tools such as computers, bar code scanners, etc.

Determine how and where vaccines will be stored, and purchase appropriate vaccine storage and temperature monitoring equipment

The Centers for Disease Control and Prevention (CDC) strongly recommends you have separate refrigerator and freezer units to properly store your vaccines. These units should be dedicated to vaccine storage. They must not be used for any purpose or product beyond the storage of pharmaceuticals and biological products. That means no staff lunches or beverages! Aside from possible contamination issues from food being stored in the same unit, frequent opening and closing of the doors will contribute to temperature fluctuations. (See Step 3: Vaccine Storage and Handling for additional details.) Your refrigerator and freezer do not have to come from a medical supply company. But you do want to be sure you get quality units that can reliably maintain vaccine storage temperatures.

As previously noted, CDC recommends stand-alone refrigerators and freezers for vaccine storage. If you must use a combination refrigerator/freezer unit, vaccines should be stored only in the refrigerator compartment, with the freezer not used for vaccine storage. That’s because combination units are less capable of simultaneously maintaining proper storage temperatures in both the refrigerator and freezer compartments. A combination freezer set for proper varicella storage temperature can inadvertently cause the refrigerator to be too cold and risk freezing refrigerated vaccines. (NOTE: Small “dormitory-style” or “bar-style” combined refrigerator-freezers are never acceptable for vaccine storage. Studies have confirmed that these units pose a significant risk for freezing vaccine.)

To be sure the refrigerator and freezer are functioning properly, you will need to invest in appropriate thermometers.

Details about refrigerator and thermometer selection can be found in Step 3: Vaccine Storage and Handling. For now, be aware that someone (and a back-up person) must be assigned the responsibility to monitor and record temperatures at least twice a day.

Purchase vaccine administration supplies

Depending on the activities your clinic or setting currently performs, you already may have many of the items needed for vaccine administration. For instance, if you already give some type of injections,
you will have syringes, needles, and a sharps container for used needles. For the sake of thoroughness, check out the Immunization Action Coalition’s (IAC) Supplies You May Need at an Immunization Clinic, available at www.immunize.org/catg.d/p3046.pdf. This convenient checklist also may be used as an inventory tracker. When an item runs low, mark or circle it on a copy of the checklist for a quick reminder the next time an order is made. You also will need to purchase one service: medical waste disposal for your used syringes and needles. If this service is not already part of your medical setting, consult local medical waste-disposal companies for options and prices.

Purchase emergency response supplies

Although allergic reactions are extremely rare, you must have appropriate emergency medical supplies on hand, just in case.

Although allergic reactions are extremely rare, you must have appropriate emergency medical supplies on hand, just in case. Refer to the IAC guidance document, Medical Management of Vaccine Reactions in Adult Patients at www.immunize.org/catg.d/p3082.pdf to identify the supplies you will need.

Determine who can provide vaccinations in your setting

Laws and regulations covering who can provide vaccinations vary widely from state to state. For example, specific laws and regulations govern whether certain healthcare personnel can prescribe/administer vaccines independently or if they may do so only under written standing orders from a physician. Some types of personnel may administer vaccines only with a written order from a physician or other high-level professional who is physically on site. Be sure to check with your state’s medical professional licensing boards to determine who is legally authorized to provide vaccines in your location.

Arrange for staff training

In addition to orienting your staff to the overall purpose, function, and flow of the vaccination clinic, you will want to assure competency of clinic staff in administering vaccines. Your state or local health department may be able to provide such training or can refer you to other resources— or perhaps you have well-trained individuals who work in a different part of your organization. Also available from IAC is a staff-training DVD, Immunization Techniques: Best Practices with Infants, Children, and Adults, created by the California Department of Public Health, Immunization Branch. This DVD is available for a nominal charge at www.immunize.org/dvd, or it may be streamed at www.youtube.com/watch?v=WsZ6NEijJfI. But there is no substitute for live instruction.
Organize vaccination paperwork and reference materials

Here are some of the most important forms you are going to use in your vaccination practice:

- **Vaccine Information Statements (VISs)**, available at [www.immunize.org/vis](http://www.immunize.org/vis). These federally required documents explain the risks and benefits of vaccines and are needed for each vaccine you intend to administer in your clinic. They are available in English and a variety of other languages.

- Wallet-sized foldable **Immunization Record Cards**, available for a nominal charge at [www.immunize.org/shop/record-cards.asp](http://www.immunize.org/shop/record-cards.asp)

- **Screening Checklist for Contraindications to Vaccines for Adults**, [www.immunize.org/catg.d/p4065.pdf](http://www.immunize.org/catg.d/p4065.pdf)

- **Screening Checklist for Contraindications to Inactivated Injectable Influenza Vaccination**, [www.immunize.org/catg.d/p4066.pdf](http://www.immunize.org/catg.d/p4066.pdf)


- **Temperature Logs for Refrigerator**:

- **Temperature Logs for Freezer**:

- **Vaccine Storage Troubleshooting Record**


- **Vaccine Adverse Event Reporting System (VAERS)**, [www.vaers.hhs.gov/index](http://www.vaers.hhs.gov/index). VAERS is part of the nationwide vaccine safety surveillance system. The VAERS website is where you report clinically important adverse events that occur after vaccination of adults and children, even if you are not sure whether the vaccine caused the adverse event.

- Contact your state or local immunization program to determine if there are any materials specific to your area that you should keep on hand.

---

**STEP 2: Setting Up for Vaccination Services**
Multiple studies have shown that implementation of standing orders is one of the best ways to increase adult immunization rates.

Create standing orders documents for times when a supervising clinician is not available to write orders

This is a simple but powerful step. By now, you are getting most of the supplies and equipment in place for your vaccination practice. You also need to know who is going to be doing the vaccinating. Unless you always have a physician — or other medical staff with prescribing authority — on site and accessible to make an assessment and order vaccines for individual patients, you may need standing orders that permit a registered nurse (RN) or other approved licensed practitioner to do so when a physician is not present. Rules about which personnel are allowed to provide this service, and the credentials they must have, differ by state.

With standing orders in place, an authorized vaccinator — usually an RN or pharmacist — does not need to get explicit permission from a doctor to screen and vaccinate each time a patient comes in.

Multiple studies have shown that implementation of standing orders is one of the best ways to increase adult immunization rates. Implementation of standing orders isn’t complicated. It simply means that a doctor signs a “blanket” order for authorized healthcare professionals to administer a given vaccine to patients with certain indications after they have been screened for contraindications. With standing orders in place, an authorized vaccinator — usually an RN or pharmacist — does not need to get explicit permission from a doctor to screen and vaccinate each time a patient comes in. Working under the doctor’s standing orders, he or she conducts a vaccination assessment. In fact,
the standing orders to vaccinate might be made a part of routine patient-care clinic procedure – just like documenting weight and blood pressure – so that vaccination status and needs are checked and carried out every time a patient enters the clinic. This greatly reduces the likelihood that a patient will fall through the cracks and miss an opportunity to be vaccinated. To help you implement standing orders, IAC has developed an easy-to-follow guide, 10 Steps to Implementing Standing Orders for Immunization in Your Practice Setting, available at www.immunize.org/catg.d/p3067.pdf. More information on the use of standing orders is available in IAC’s Using Standing Orders for Administering Vaccines: What You Should Know, available at www.immunize.org/catg.d/p3066.pdf.

Standing orders documents signed and dated by your health setting’s medical director or supervising clinician must be kept on file within your practice. These are internal, operational documents; they do not need to be submitted to a state agency. You should have standing orders not only for administering vaccines, but also for the management of vaccine reactions (see Step 5). Examples available on the IAC website at www.immunize.org/standing-orders include standing orders for adult vaccines such as hepatitis A; hepatitis B; human papillomavirus (HPV); varicella (chickenpox); influenza; measles, mumps, and rubella (MMR); meningococcal ACWY and B; pneumococcal conjugate and polysaccharide; tetanus-diphtheria toxoids and pertussis (Tdap/Td); and zoster. Standing orders templates also are available for the use of tetanus-diphtheria toxoids and pertussis vaccine for pregnant women.

Order vaccines – Yes, do this last!

Now that the stage has been set and all the props are in place, it’s time to bring on the main actors – the vaccines. You shouldn’t order them too soon because they are expensive, fragile, and have a limited shelf life. Before ordering vaccines, test the refrigerator unit and freezer unit temperatures for a week or more to make sure the appliances function properly and maintain temperatures within the proper range, and gather all the injection supplies and copies of forms that you will need.

Vaccines can be purchased from a number of different places. You can order them directly from vaccine companies (just put the company name
and “order vaccine” into your search engine) or through pharmaceutical supply companies such as the ones that sell you other medical supplies. You also might be able to order them through your parent institution – your university if you are part of one, or your health plan if you are affiliated with one. Some adult vaccines might be available through special programs conducted by your state or local health department.

Most vaccines are provided in single-dose vials and/or pre-filled syringes. For a complete list of all products used with both children and adults in the United States, see Vaccines Licensed for Use in the United States, available at www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/ucm093833.htm.

Increasing adult vaccination coverage rates really does happen one clinic at a time and one vaccination at a time.

Congratulations! You’ve made all the appropriate preparations to provide vaccines to adults. Increasing adult vaccination coverage rates really does happen one clinic at a time and one vaccination at a time. Let’s begin!
STEP 2: SETTING UP FOR VACCINATION SERVICES

Materials and Resources for You to Use

Tools for Providers

10 Steps to Implementing Standing Orders for Immunization in Your Practice Setting (IAC)
www.immunize.org/catg.d/p3067.pdf

Adult Standing Orders – Templates (IAC)
www.immunize.org/handouts/adult-vaccination.asp#standingorders

HealthMap Vaccine Finder (HealthMap)
https://vaccinefinder.org

Immunization Record Cards (IAC)
www.immunize.org/shop/record-cards.asp

Supplies You May Need at an Immunization Clinic (IAC) – www.immunize.org/catg.d/p3046.pdf

Using Standing Orders for Administering Vaccines: What You Should Know (IAC)
www.immunize.org/catg.d/p3066.pdf

Vaccine Information Statements (VISs) and Translations (IAC) – www.immunize.org/vis

Additional Provider Resources

4 Pillars Practice Transformation Program Toolkit (University of Pittsburgh)
www.4pillarstoolkit.pitt.edu

Adult Vaccination Clinic Resources (IAC)
www.immunize.org/handouts/adult-vaccination.asp

Guidelines for Pharmacy-Based Immunization Advocacy (APhA) – www.pharmacist.com/guidelines-pharmacy-based-immunization-advocacy

Vaccine Manufacturers: Contact and Product Information (IAC)
www.immunize.org/resources/manufact_vax.asp

Information for Patients

Which Vaccines Do I Need Today? (IAC)
www.immunize.org/catg.d/p4036.pdf

General Information

Immunization Action Coalition (IAC)
www.immunize.org

Immunization Center (APhA) – www.pharmacist.com/immunization-center?dfptag=imz

State Immunization Coordinators (IAC)
www.immunize.org/coordinators

Note: The publisher of each resource is shown as an acronym in the parentheses following the title. A key to these acronyms is included in Appendix A: Acronyms and Abbreviations.
## Supplies You May Need at an Immunization Clinic

### Vaccines you may need⁶
Select the ones you need for the age of the patient you expect at your clinic.

<table>
<thead>
<tr>
<th>Refrigerated (MMR may also be frozen)</th>
<th>Immunization Clinic Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria, tetanus, and pertussis (DTaP)</td>
<td>Vaccine and Miscellaneous Supplies²</td>
</tr>
<tr>
<td>DTaP-HepB-IPV (Pedicare)</td>
<td>□ Appropriate storage units and monitoring equipment (thermometers) to maintain vaccine cold chain (see <a href="http://www.cdc.gov/assets/docs/IMM-983.pdf">www.cdc.gov/assets/docs/IMM-983.pdf</a>)</td>
</tr>
<tr>
<td>DTaP-IPV/Hib (Pentacel)</td>
<td>□ 1 or 2 needle disposal “sharps” containers</td>
</tr>
<tr>
<td>DTaP-IPV (Kinrix, Quadracel)</td>
<td>□ 22 and 25g needles</td>
</tr>
<tr>
<td>Haemophilus influenzae type b (Hib)</td>
<td>□ ¾”, ¹⁄₂”, ¹⁄₄&quot;, and 2”</td>
</tr>
<tr>
<td>Hib-MenCY (MenHibrix)</td>
<td>□ 1 box of medical gloves (appropriate size range for staff)</td>
</tr>
<tr>
<td>Hepatitis A (HepA)</td>
<td>□ Alcohol wipes</td>
</tr>
<tr>
<td>Hepatitis B (HepB)</td>
<td>□ Spot band aids</td>
</tr>
<tr>
<td>HepA-HepB (Twinstrix)</td>
<td>□ Rectangular band aids</td>
</tr>
<tr>
<td>HepB-Hib (Covax)</td>
<td>□ 1” gauze pads or cotton balls</td>
</tr>
<tr>
<td>Human papillomavirus (HPV)</td>
<td>□ Thermometors along with probe covers</td>
</tr>
<tr>
<td>Influenza, injectable (IIV) (in season)</td>
<td>□ Certified calibrated thermometer for vaccine cooler, if needed</td>
</tr>
<tr>
<td>Influenza, live attenuated intranasal (LAIV) (in season)</td>
<td>□ Paper towels</td>
</tr>
<tr>
<td>Measles, mumps, rubella (MMR)</td>
<td>□ Bleach solution in spray bottle</td>
</tr>
<tr>
<td>Meningococcal ACWY</td>
<td></td>
</tr>
<tr>
<td>Meningococcal B</td>
<td></td>
</tr>
<tr>
<td>Pneumococcal conjugate (PCV13)</td>
<td></td>
</tr>
<tr>
<td>Pneumococcal polysaccharide (PPSV23)</td>
<td></td>
</tr>
<tr>
<td>Polio, inactivated (IPV)</td>
<td></td>
</tr>
<tr>
<td>Rotavirus (RV)</td>
<td></td>
</tr>
<tr>
<td>Tetanus-diptheria, adult (Td)</td>
<td></td>
</tr>
<tr>
<td>Tetanus, diptheria, and pertussis (Tdap)</td>
<td></td>
</tr>
<tr>
<td>Diluent¹ for ActHIB, Hibexir, MMR, Men-Hibrix, Menveo, Pentacel, and Rotarix</td>
<td></td>
</tr>
<tr>
<td>Frozen (Never pack frozen vaccine with dry ice)</td>
<td></td>
</tr>
<tr>
<td>Measles, mumps, rubella, varicella (MMRV)</td>
<td></td>
</tr>
<tr>
<td>Varicella</td>
<td></td>
</tr>
<tr>
<td>Zoster</td>
<td></td>
</tr>
<tr>
<td>Diluent¹ for MMRV, Varivax, and Zostavax</td>
<td></td>
</tr>
</tbody>
</table>

For instructions on how to pack and transport vaccines, go to www.cdc.gov/vaccines/recs/storage/toolkit/download-handling-toolkit.pdf. pages 69-72.

### Immunization Clinic Documentation
- Vaccine standing orders and protocols¹
- Vaccination administration record sheets¹ (i.e., medical records, if needed)
- Billing forms, if needed
- Screening Checklist for Contraindications to Vaccines for Children and Teens¹
- Screening Checklist for Contraindications to HPV, MCV4, and Tdap for Teens¹

### Immunization Action Coalition
Saint Paul, Minnesota  •  651-647-9009  •  www.immunize.org  •  www.vaccineinformation.org

---

¹ Always check the expiration dates of all vaccines, medications, and medical supplies before using!
² In addition, be sure to check that you have the most current versions of the VISs. To learn more about VISs, visit www.immunize.org/vis.
³ Diluent should never be frozen
⁴ These materials are available at www.immunize.org/handouts.
⁵ These materials may be purchased at www.immunize.org/shop.

---

Technical content reviewed by the Centers for Disease Control and Prevention
To access Vaccine Information Statements in many languages, visit www.immunize.org/vis

Influenza Vaccine Information Statement

Vacuna (inactivada o recombinante) contra la influenza (gripe):
Lo que debe saber

1. ¿Por qué vacunarse?

La influenza gripe o el "gripe" es una enfermedad contagiosa que se propaga por los escalones de las escaleras, moviéndose sobre

La influenza es conocida como el virus de la influenza y la mayoría de las mejores formas de tratar el virus son las maniobras de

Cuando personas con una red de la influenza (los sistemas respiratorios, el sistema inmunológico recurrente), y puede propagarse tanto a las

La influenza es más grave en algunos países, en las personas mayores, en los niños pequeños, en las personas que tienen problemas de salud, en los

La influenza también puede causar movimientos en el cuadro de las plusiones, en las personas que tienen enfermedad de la

La influenza es más grave en algunos países, en las personas mayores, en los niños pequeños, en las personas que tienen problemas de salud, en los

La vacuna contra el influenza puede:

- Preventir que usted se enferme de la influenza.
- Reducir la severidad de la influenza en los casos que sí se enferman.
- Evitar que el virus se propague a otros a quién puede promover el contagio de gripe.

2. Vacunas contra la influenza inactivadas y recombinantes

Se recomienda que todos los niños bajo los 6 años de edad vacunarse contra la influenza cada temporada de influenza. Algunos niños con

Algunos niños, niños con inmunodeficiencias, niños con un antecedente de enfermedades graves, niños con otras

3. Algunas personas no deben recibir esta vacuna

Algunas personas no pueden recibir esta vacuna.

- Si tiene alguna alergia grave a un componente de la vacuna (por ejemplo, ovomamada).
- Si tiene una enfermedad crónica o una inmunodeficiencia.

4. Riesgos de reacción a la vacuna

- Igual que cualquier medicamento, incluyendo las vacunas, hay riesgo de reacciones adversas. Normalmente son leves y no requieren tratamiento médico.

www.immunize.org/vis
To access the current, ready-to-copy version of this piece, visit www.immunize.org/catg.d/p3067.pdf

10 Steps to Implementing Standing Orders for Immunization in Your Practice Setting

Introduction

Standing orders are written protocols approved by a physician or other appropriate authority that identify specific immunization services, such as ages or dates when vaccination should be performed. These orders are frequently written for certain medications, such as antibiotics. They can be beneficial in reducing overwork, increasing patient safety and reducing errors, as written protocols can be used to guide the process and ensure that all necessary services are given. Standing orders can ensure that patients receive necessary vaccinations on time. If written orders are used, there is a decreased chance that important vaccines or vaccine doses will be left out.

When used, standing orders can improve your practice’s standing orders.

Readiness to Implement Standing Orders

Have the standing order(s) reviewed and signed by the medical director or clinician responsible for your practice’s immunization program. This person is responsible for implementing and overseeing vaccination programs, ensuring that you are making the most of your resources and programs. If standing orders are not in place, these individuals can help to establish this process.

Step 2: Get Ready - Build Support of Leadership

Prepare for the changes with a support group at your clinic.

A support group is a helpful way to bring providers together to discuss the possible changes in the practice. This can be a valuable way to ensure that all providers and staff are on the same page, and that they can provide input on the process. The support group can also help to ensure that all providers and staff are aware of the changes and will be able to provide input on the process.

Step 3: Get Set – Develop Materials and Strategies

Prepare materials to present to the support group.

Materials can be very helpful in presenting the changes to the support group. This can include printed materials, such as brochures or flyers, as well as presentations. The materials can include information on the changes and how they will affect the practice. This can be a valuable way to ensure that all providers and staff are aware of the changes and will be able to provide input on the process.

Step 4: Get Make It Happen

Implement the changes in the practice.

The changes can be implemented in the practice by presenting the changes to the support group and ensuring that all providers and staff are aware of the changes. This can be done by presenting the changes in a meeting or through a presentation. The changes can also be implemented by providing training to the providers and staff. This can be done by providing training sessions or by providing information in the support group.

Materials You Will Need for This Task

- Immunization Action Coalition
  - www.immunize.org
  - www.cdc.gov

- Immunization Action Coalition's standing orders templates for all routinely recommended vaccines available to download at www.immunize.org/standingorders.

- Technical content reviewed by the Centers for Disease Control and Prevention.

- The burden of disease as a result of vaccine-preventable diseases is seen.
Standing Orders Templates for Administering Vaccines to Children/Teens and Adults

Download these standing orders and use them “as is” or modify them to suit your work setting.

Visit www.immunize.org/standing-orders for all sets.

Click blue text to view standing orders documents

<table>
<thead>
<tr>
<th>STANDING ORDER (date of latest revision)</th>
<th>VACCINES</th>
<th>STANDING ORDER (date of latest revision)</th>
</tr>
</thead>
<tbody>
<tr>
<td>child</td>
<td>DTaP</td>
<td>—</td>
</tr>
<tr>
<td>child/teen</td>
<td>HepA</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>HepB</td>
<td>adult</td>
</tr>
<tr>
<td>child</td>
<td>Hib</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>HPV</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>IPV (polio)</td>
<td>—</td>
</tr>
<tr>
<td>child/teen</td>
<td>Influenza</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>MMR</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>MenACWY (MCV4), MPSV</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>MenB</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>PCV</td>
<td>adult</td>
</tr>
<tr>
<td>child</td>
<td>PPSV</td>
<td>adult</td>
</tr>
<tr>
<td>child</td>
<td>Rotavirus</td>
<td>—</td>
</tr>
<tr>
<td>child</td>
<td>Tdap</td>
<td>pregnant woman</td>
</tr>
<tr>
<td>child/teen</td>
<td>Tdap/Td</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>Varicella</td>
<td>adult</td>
</tr>
<tr>
<td>child/teen</td>
<td>Zoster</td>
<td>adult</td>
</tr>
</tbody>
</table>

All sets of standing orders for routinely recommended vaccines are available at www.immunize.org/standing-orders

Immunization Action Coalition
www.immunize.org/catg.d/u6090.pdf • Item #U6090 (2/17)