Standing Orders for Administering Influenza Vaccines

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Standing Orders for Administering Influenza Vaccines to Children and Adolescents

Purpose: To reduce morbidity and mortality from influenza by vaccinating all children and adolescents 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 state law, may vaccinate children and adolescents who meet any of the criteria below.

Procedure:

1. Identify children and adolescents ages 6 months and older who have not completed their influenza vaccination(s) for th current influenza season.
2. Screen all patients for contraindications and precautions to influenza vaccine:
   a. **Contraindications:** a serious systemic or anaphylactic reaction after ingesting eggs, after receiving a previous dose of influenza vaccine, or to an influenza vaccine component. For a list of vaccine components, go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf. Do not give live attenuated influenza vaccine (LAIV; nasal spray) to people with a history of hypersensitivity to eggs, either anaphylactic or non-anaphylactic; pregnant adolescents; children younger than age 2 yrs; children age 2 (ing or asthma within the past 12 mos, based on a healthcare provider's sta chronic pulmonary (including asthma), cardiovascular (excluding hyperte cular, hematologic, or metabolic (e.g., diabetes) disorders; immunosuppre or HIV; long-term aspirin therapy (applies to a child or adolescent age 6 mo
   b. **Precautions:** moderate or severe acute illness with or without fever; histor 6 weeks of a previous influenza vaccination; for TIV only, allergic reactio patient for 30 minutes following vaccination); for LAIV only, close contac the person requires protective isolation, receipt of influenza antivirals (e.g. oseltamivir) within the previous 48 hours or possibility of use within 14 da
3. Provide all patients (or, in the case of a minor, their parent or legal representati Vaccine Information Statement (VIS). You must document in the patient's medi of the VIS and the date it was given to the patient (parent/legal representative). a copy of the VIS in their native language, if available and preferred; these can
4. Administer injectable trivalent inactivated vaccine (TIV) intramuscularly in t lacking adequate deltoid mass) or in the deltoid muscle (for toddlers, childre needle length appropriate to the child's age and body mass: infants 6 through and older: 1–1½". Give 0.25 mL to children 6–35 mos and 0.5 mL for all oth needle may be used for patients weighing less than 130 lbs (<60kg) for inject is stretched tight, subcutaneous tissue is not bunched, and the injection is ma healthy children age 2 yrs and older may be given 0.2 mL of intranasal LAIV the patient is in an upright position. Children age 6 mos through 8 yrs should the first dose if they are receiving influenza vaccine for the first time or if the in the 2010–2011 vaccination season.
5. Document each patient's vaccine administration information and follow up i
   a. **Medical chart:** Record the date the vaccine was administered, the manufa and route, and the name and title of the person administering the vaccine. I reason(s) for non-receipt of the vaccine (e.g., medical contraindication, pa
   b. **Personal immunization record card:** Record the date of vaccination and t
6. Be prepared for management of a medical emergency related to the administr gency medical protocol available, as well as equipment and medications.
7. Report all adverse reactions to influenza vaccine to the federal Vaccine Adve www.vaers.hhs.gov or (800) 822-7967. VAERS report forms are available at

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

Medical Director's signature: _____ Effective dat

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

Standing Orders for Administering Influenza Vaccine to Adults

Purpose: To reduce morbidity and mortality from influenza 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 patients who meet any of the criteria below.

Procedure:

1. Identify adults with no history of influenza vaccination for the current influenza season.
2. Screen all patients for contraindications and precautions to influenza vaccine:
   a. **Contraindications:** a serious systemic or anaphylactic reaction after ingesting eggs, after receiving a previous dose of influenza vaccine, or to an influenza vaccine component. For a list of vaccine components, go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf. Do not give live attenuated influenza vaccine (LAIV; nasal spray) to an adult with a history of hypersensitivity to eggs, either anaphylatic or non-anaphylactic; who is pregnant, is age 50 years or older, or who has chronic pulmonary (including asthma), cardiovascular (excluding hypertension), renal, hepatic, neurologic/neuromuscular, hematologic, or metabolic (including diabetes) disorders; immunosuppression, including that caused by medications or HIV.
   b. **Precautions:** moderate or severe acute illness with or without fever; history of Guillain Barré syndrome within 6 weeks of a previous influenza vaccination; for TIV only, allergic reaction to eggs consisting of hives only (observe patient for at least 30 minutes following vaccination); for LAIV only, close contact with an immunosuppressed person when the person requires protective isolation, receipt of influenza antivirals (e.g., amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours or possibility of use within 14 days after vaccination
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 influenza vaccine as follows: a) For adults of all ages, give 0.5 mL of injectable trivalent inactivated influenza vaccine (TIV-IM) intramuscularly (22–25g, 1–1½" needle) in the deltoid muscle. (Note: A ⅝" needle may be used for adults weighing less than 130 lbs (<60 kg) for injection in the deltoid muscle *only* if the skin is stretched tight, subcutaneous tissue is not bunched, and the injection is made at a 90 degree angle; or b) For healthy adults younger than age 50 years, give 0.2 mL of intranasal LAIV; 0.1 mL is sprayed into each nostril while the patient is in an upright position; or c) For adults ages 18 through 64 years, give 0.1 ml TIV-ID intradermally by inserting the needle of the microinjection system at a 90 degree angle in the deltoid muscle; or d) For adults ages 65 years and older, give 0.5 mL of high-dose TIV-IM intramuscularly (22–25g, 1–1½" needle) in the deltoid muscle.
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 given, record the reasons(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.
7. Report all adverse reactions to influenza vaccine to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or (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: _____

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Immunization Action Coalition • 1573 Selby Ave. • St. Paul, MN 55104 • (651) 647-9009 • www.immunize.org • www.vaccineinformation.org

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

Influenza vaccination standing orders for children: www.immunize.org/catg.d/p3074a.pdf

Influenza vaccination standing orders for adults: www.immunize.org/catg.d/p3074.pdf