

Use These Standing Orders Templates for Administering Influenza Vaccine in Your Healthcare Setting

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

Standing orders for other vaccines are available at www.immunize.org/standing-orders. NOTE: This standing order template may be adapted per a practice's discretion without obtaining permission from IAC. As a courtesy, please acknowledge IAC as its source.

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
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.

NOTE: Live attenuated influenza vaccine (LAIV4; FluMist), is not recommended by CDC's Advisory Committee on Immunization Practices for use in the U.S. during the 2017–18 influenza season. Because LAIV4 is still a licensed vaccine that might be available and that some providers might elect to use, for informational purposes, reference is made to previous recommendations for its use.

Procedure

- Assess Adults for Need of Vaccination** against influenza
 - All adults who are recommended to receive influenza vaccination each year.
 - Pregnant
 - Age-appropriate
 - People
- Screen**

Do not give prior dose package append

Do not give if

 - is pregnant
 - is age 2 through 4 years who has received a diagnosis of asthma or who has experienced wheezing or asthma within the past 12 months, based on a healthcare provider's statement or medical record
 - has immunosuppression (including that caused by medications or HIV)
 - received influenza antivirals (e.g., amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours
 - is a close contact of or who provides care for a severely immunosuppressed person who requires a protective environment

Contraindications for use of all influenza vaccines
Do not give influenza vaccine to a child or adolescent who has experienced a serious systemic or anaphylactic reaction to a prior dose of the 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/exciptient-table-2.pdf.

Contraindications only for use of live attenuated influenza vaccine (LAIV4; FluMist, nasal spray)
Do not give live attenuated influenza vaccine (LAIV4; nasal spray) to a child or adolescent who:

 - is pregnant
 - is age 2 through 4 years who has received a diagnosis of asthma or who has experienced wheezing or asthma within the past 12 months, based on a healthcare provider's statement or medical record
 - has immunosuppression (including that caused by medications or HIV)
 - received influenza antivirals (e.g., amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours
 - is a close contact of or who provides care for a severely immunosuppressed person who requires a protective environment

Precautions for use of all influenza vaccines

 - Moderate or severe acute illness with or without fever
 - History of Guillain-Barré syndrome within 6 weeks of a previous influenza vaccination

Precautions for use of LAIV only

 - Age 5 years or older with asthma
 - Other chronic medical conditions that might predispose the person to complications of influenza infection (e.g., chronic pulmonary, cardiovascular [excluding isolated hypertension], renal, hepatic, neurologic, or metabolic disorders [including diabetes mellitus])

PRECAUTIONS WITH EGGS ALLERGY: People with egg allergy of any severity can receive any licensed influenza vaccine.
- 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 regulations. If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal). Offer the vaccine to the patient 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.
- Be Prepared to Manage Medical Emergencies**
Be prepared to manage medical emergencies while the vaccine is being administered.
- Report**
Report any adverse events to the appropriate authority (e.g., state health department or physician office). Vaccine administration should be supervised by a healthcare provider who is able to recognize and manage severe allergic conditions.

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
For vaccine that is to be administered intramuscularly, choose the needle gauge, needle length, and injection site according to the following chart:

GENDER AND WEIGHT OF PATIENT	NEEDLE GAUGE	NEEDLE LENGTH	INJECTION SITE
Female or male less than 130 lbs	22–25	5/8"–1"	Deltoïd muscle of arm
Female or male 130–152 lbs	22–25	1"	Deltoïd muscle of arm
Female 153–200 lbs	22–25	1–1½"	Deltoïd muscle of arm
Male 153–260 lbs	22–25	1–1½"	Deltoïd muscle of arm
Female 200+ lbs	22–25	1½"	Deltoïd muscle of arm
Male 260+ lbs	22–25	1½"	Deltoïd muscle of arm

* A 5/8" needle may be used in patients weighing less than 130 lbs (<60 kg) for IM injection in the deltoïd muscle only if the skin is stretched tight, the subcutaneous tissue is not bunched, and the injection is made at a 90-degree angle to the skin.

For vaccine that is to be administered intranasally or intradermally, prepare the vaccine according to directions in the package insert.

5 Administer Influenza Vaccine according to the criteria and guidance in the table below:

TYPE OF VACCINE	AGE GROUP	DOSE	ROUTE	INSTRUCTIONS ¹
Inactivated influenza vaccine (IIV)	All ages	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoïd muscle.
IIV-intradermal	18 through 64 years	0.1 mL	Intradermal (ID)	Insert needle of the microinjection system at a 90-degree angle in the deltoïd area.
IIV-high dose	65 years and older	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoïd muscle.
Adjuvanted inactivated influenza vaccine (aIIV)	65 years and older	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoïd muscle.
Cell culture-based IIV (ccIIV)	All ages	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoïd muscle.
Recombinant influenza vaccine (rIIV)	18 years and older	0.5 mL	Intramuscular (IM)	Administer vaccine in deltoïd muscle.
Live attenuated influenza vaccine (LAIV)	Healthy, younger than age 50 years (except pregnant women)	0.2 mL (0.1 mL into each nostril)	Intranasal spray (NAS)	Spray half of vaccine into each nostril while the patient is in an upright position.

¹ For complete instructions on how to administer influenza vaccine, see "How to Administer Intramuscular, Intradermal, and Intranasal Vaccines" at www.immunize.org/catg.d/p3074a.pdf.

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STANDING ORDERS FOR Administering Influenza Vaccine 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 (ACIP).

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 children and adolescents who meet any of the criteria below.

NOTE: Live attenuated influenza vaccine (LAIV4; FluMist), is not recommended by CDC's Advisory Committee on Immunization Practices for use in the U.S. during the 2017–18 influenza season. Because LAIV4 is still a licensed vaccine that might be available and that some providers might elect to use, for informational purposes, reference is made to previous recommendations for its use.

Procedure

- Assess Children and Adolescents for Need of Vaccination** against influenza
 - All children and teens 6 months of age and older are recommended to receive influenza vaccination each year.
 - A second dose of influenza vaccine is recommended 4 weeks or more after the first dose for children age 6 months through 8 years if they have not received 2 doses in previous years (not necessarily in the same season).
- Screen for Contraindications and Precautions**
Contraindications for use of all influenza vaccines
Do not give influenza vaccine to a child or adolescent who has experienced a serious systemic or anaphylactic reaction to a prior dose of the 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/exciptient-table-2.pdf.

Contraindications only for use of live attenuated influenza vaccine (LAIV4; FluMist, nasal spray)
Do not give live attenuated influenza vaccine (LAIV4; nasal spray) to a child or adolescent who:

 - is pregnant
 - is age 2 through 4 years who has received a diagnosis of asthma or who has experienced wheezing or asthma within the past 12 months, based on a healthcare provider's statement or medical record
 - has immunosuppression (including that caused by medications or HIV)
 - received influenza antivirals (e.g., amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours
 - is a close contact of or who provides care for a severely immunosuppressed person who requires a protective environment

Precautions for use of all influenza vaccines

 - Moderate or severe acute illness with or without fever
 - History of Guillain-Barré syndrome within 6 weeks of a previous influenza vaccination

Precautions for use of LAIV only

 - Age 5 years or older with asthma
 - Other chronic medical conditions that might predispose the person to complications of influenza infection (e.g., chronic pulmonary, cardiovascular [excluding isolated hypertension], renal, hepatic, neurologic, or metabolic disorders [including diabetes mellitus])

PRECAUTIONS WITH EGGS ALLERGY: People with egg allergy of any severity can receive any licensed influenza vaccine.

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Standing Orders for Administering Influenza Vaccine to Children and Adolescents
www.immunize.org/catg.d/p3074a.pdf

Standing Orders for Administering Influenza Vaccine to Adults
www.immunize.org/catg.d/p3074.pdf

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