NURSING STANDING ORDER

Health POINT

Standing Orders for Administering Influenza 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 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/package- inserts) or go www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf. Do not give live attenuated influenza vaccine (LAIV; nasal spray) to a person who has a history of either an anaphylactic or non-anaphylactic hypersensitivity to eggs, who is pregnant, who is age 50 years or older, who has received influenza antivirals (e.g., amantadine, rimantadine, zanamivir, or oseltamivir) within the previous 48 hours or has possibility of use within 14 days after vaccination, or who cares for a severely immunosuppressed person who requires a protective environment.
    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 LAIV only, an adult with a medical condition which might predispose the adult to higher risk of complications attributable to influenza (e.g., chronic pulmonary [including asthma], cardiovascular [excluding isolated hypertension], renal, hepatic, neurologic/neuromuscular, hematologic, or metabolic [including diabetes] disorders.
    c. **Other considerations:** an egg-free recombinant hemagglutin influenza vaccine (RIV) may be used for people ages 18–49 years with egg allergies of any severity. People who experience onset of hives only after ingesting eggs may also receive inactivated influenza vaccine (IIV) with the following additional safety measures: 1) administration by a healthcare provider familiar with the potential manifestations of egg allergy and 2) observation for 30 minutes after receipt of the vaccine for signs of a reaction.
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. Give 0.5 mL of IIV to adults of all ages, or RIV to adults age 18–49 years, intramuscularly (22–25g, 1–1½" needle) in the deltoid muscle. (Note: A 5/8" needle may be used for adults weighing 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).

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.
c. For adults age 18 through 64 years, give 0.1 mL IIV-ID intradermally by inserting the needle of the microinjection system at a 90 degree angle in the deltoid muscle.
d. For adults age 65 years and older, give 0.5 mL of high-dose IIV-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 place:
   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 (if requested): 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 HealthPoint until rescinded or until December 31, 2016.

Medical Director's signature: 

Effective date: January 1, 2016

References: Immunization Action Coalition, 09/14
(Technical content reviewed by the Centers for Disease Control and Prevention)