

SAMPLE TEMPLATE

Standing Order and Protocol for Influenza and Pneumococcal Outreach: *dates when in effect*

In accordance with New York State Department of Education regulations (8 NYCRR §64.7) I am prescribing this standing (non-patient specific) order and protocol. Registered Nurses employed by the name of the agency/employer, clinic, facility, or practice are authorized to administer influenza and pneumococcal vaccine and anaphylaxis treatment agents, including epinephrine for the emergency of treatment of anaphylaxis, as set forth below.

These nurses are authorized to administer the influenza and pneumococcal vaccines and anaphylaxis treatment agents only in the course of their employment with name of the agency/employer, clinic, facility, or practice.

1) **Influenza vaccine**

Influenza vaccine should be given to:

- All persons \geq 50 years of age, 0.5 ml IM X 1
- Persons between 18 and 50 years of age may be given influenza vaccine (0.5 ml IM X 1) if they meet either of the following two criteria:
 - Have a chronic medical condition: such as heart disease, pulmonary disorders including asthma, diabetes, kidney disease, hemoglobinopathies, and compromised immune systems (HIV or immunosuppressive therapy);
 - Are a household member or health care worker (including home health attendants) who provide care to persons at high-risk individuals.

All persons will be screened for contraindications to influenza vaccine which include:

- Serious allergic reaction to a vaccine component (specific concern re: eggs) or history of a serious allergic reaction to a prior dose
- Moderate or severe acute illness (vaccine should be deferred until the person is well). The person should be vaccinated if they have a minor illness such as diarrhea or upper respiratory tract illness (including otitis media) with or without fever or are on current antimicrobial therapy.

2) **Pneumococcal polysaccharide vaccine (PPV)**

PPV should be given to:

- All persons \geq 65 years of age, X 0.5 ml (may be given IM or SC) X 1
- Adults with chronic illness (0.5 ml given IM or SC X 1)

All persons will be screened for contraindications to PPV, which include:

- Serious previous allergic reaction
- Moderate or severe acute illness (vaccine should be deferred until the person is well). The person should be vaccinated if they have a minor illness such as diarrhea or upper respiratory tract illness (including otitis media) with or without fever or are on current antimicrobial therapy.

Revaccination is only indicated for persons aged 65 years and older who received the first dose of PPV > 5 years ago and were less than 65 years at the time of the first dose.

The Registered Nurse shall:

- Ensure that the potential vaccinee is assessed for contraindications to immunization.
- Confirm that each recipient of the vaccine has received a copy of the appropriate Vaccine Information Statement and has been informed of potential side effects and adverse reactions, orally and in writing, before administering the immunization.
- Verify that informed consent by the recipient has been obtained for the immunization before the immunization is administered.
- Report adverse reactions if notified of such reaction, as directed.
- Provide to each recipient a signed certificate of immunization with the recipient's name, date of immunization, address of immunization, administering nurse, immunization agent, manufacturer and lot number and recommendations for future immunizations and advise the recipient to communicate the information to the recipient's primary health care provider if one exists.
- Ensure that a record of all persons immunized including the recipient's name, date, address of immunization, administering nurse, immunization agent, manufacturer, lot number and recommendations for future immunization, and standing order and protocol is maintained.
- Ensure that a record is maintained of potential recipients who refused to be immunized after presenting themselves for vaccination to the registered nurse authorized hereunder.

In the event that a patient who received an influenza and/or pneumococcal vaccine develops signs or symptoms consistent with anaphylaxis, the nurse is to administer one adult dose of EPI-PEN IM (or epinephrine 0.3 mg SC which shall be available with the necessary needles and syringes at the immunization site [*USP 1:1000, 0.3 ml*]) and call 911.

The Registered Nurse shall ensure that a record of all persons to whom they have administered an anaphylaxis treatment agent, including the recipient's name, date, address of administration, administering nurse, anaphylaxis treatment agent, manufacturer, and lot number is kept.

The Registered Nurse shall report to the local emergency medical system or other provider of equivalent follow-up care information regarding the administration of the anaphylaxis treatment agent, including when it was administered, the dosage, strength, and route of administration. The nurse shall also report such information to the patient's primary care provider if one exists, unless the patient is unable to communicate the identity of his or her primary care provider.

Licensed Practical Nurses (LPN) can assist in administering immunizations (give the injection, assist in record keeping, and when appropriate, administer anaphylactic agents) as long as the Registered Nurse assesses the recipient, and is responsible for the on-site direction of the LPN in administering the immunizations.

Signature: _____

Date: _____

Physician-in charge or Nurse Practitioner

Title

Name of hospital/facility

NYS License #: