Standing Orders for Administering Zoster (SHINGRIX®) Vaccine to Adults

Purpose: To reduce morbidity and mortality from herpes zoster (shingles) disease by vaccinating all adults who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP), the Food and Drug Administration (FDA) product labeling, and the Department of Defense (DoD).

Policy: Under these standing orders, eligible nurses and other healthcare professionals working within their scope of practice may vaccinate adult patients who meet the criteria below.

Procedure

1. Identify adults who are age 50 years or older and have no history of prior receipt of SHINGRIX vaccine, regardless of previous vaccination status with ZOSTAVAX® vaccine.

   Note: SHINGRIX is FDA-approved for administration in adults as young as 50 years. Per ACIP recommendations, SHINGRIX is preferentially preferred over ZOSTAVAX vaccine and ACIP also recommends patients previously vaccinated with ZOSTAVAX receive the SHINGRIX vaccine as long as there is a minimum interval of at least 8 weeks between ZOSTAVAX and SHINGRIX.

2. Screen all patients for contraindications and precautions to the SHINGRIX vaccine:
   Contraindications:
   - a history of a severe allergic reaction (e.g., anaphylaxis) to a vaccine component including plant extract *Quillaja saponaria* (QS-21) or Monophosphoryl A (MPL). For information on vaccine components, refer to the manufacturer's package insert or go to www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/excipient-table-2.pdf

   Precautions:
   - moderate or severe acute illness with or without fever
   - There are no available human data to establish whether there is vaccine-associated risk with SHINGRIX in pregnant women.
   - It is not known whether SHINGRIX is excreted in human milk. Data are not available to assess the effects of SHINGRIX on the breastfed infant or on milk production/excretion.
   - For questions or concerns, consider consulting the DHA Immunization Healthcare Branch at 877-438-8222, Option 1.

3. Provide all patients (or their legal representative) with a copy of the most current federal Vaccine Information Statement (VIS). You must document, in the patient's medical record, the publication date of the VIS and the date it was given to the patient (parent/legal representative). 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 the SHINGRIX vaccine as follows: 0.5 mL intramuscularly followed by a second dose administered anytime between 2 and 6 months later. Use a 22-25 gauge, 1- to 1.5-inch

needle. Choose needle length appropriate to the patient's age and body mass.

5. Documentation
    - Document all immunizations administered in the electronic health record. Include date, immunization given, dose, anatomical location of administration, lot number, manufacturer, Vaccine Information Sheet (VIS) date, and the identification of the person administering the vaccine. If vaccine was not given, record the reason for non-receipt.

6. Be prepared to manage a medical emergency related to the administration of vaccines by having a written emergency medical protocol available, as well as equipment and medications.

7. Adverse Events occurring after administration of any vaccine should be reported to the Vaccine Adverse Event Reporting System (VAERS). Reports can be submitted to VAERS online, by fax, or by mail. Additional information about VAERS is available by telephone (1-800-822-7967) or online at https://vaers.hhs.gov.

8. This policy and procedure shall remain in effect for all patients of the _____ until rescinded and/or upon a change in the Medical Director, whichever is earlier.

_____ _____

Medical Director's Signature Date