

Standing Orders for Administering Hepatitis A Vaccine (HAVRIX®) to Adults

Purpose: To reduce morbidity and mortality from hepatitis A virus (HAV) infection 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 all adults in need of vaccination against hepatitis A based on the following criteria:

- age 18 years or older who live in communities, regions, or states where routine vaccination is recommended
- anticipated travel to a country with intermediate or high endemicity for hepatitis A (i.e., all except Canada, Japan, Australia, New Zealand, and Western Europe)
- anticipated close personal contact with an international adoptee from a country of high or intermediate endemicity during the first 60 days after the arrival of the adoptee in the United States
- a male who has sex with other males
- users of street drugs (injecting and non-injecting)
- diagnosis of chronic liver disease, including hepatitis B and C
- diagnosis of a clotting-factor disorder, such as hemophilia
- an unvaccinated adult with recent possible exposure to HAV (e.g., within previous two weeks).
- any other adult who wants to be protected from hepatitis A

2. Screen all patients for contraindications and precautions to hepatitis A vaccine:

Contraindications:

- a history of a serious reaction (e.g., anaphylaxis) after a previous dose of hepatitis A vaccine or to a hepatitis A vaccine component (to include neomycin).
- For information on vaccine components, refer to the [manufacturer's package insert](#) or go to <http://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/b/excipient-table-2.pdf>

Precautions:

- moderate or severe acute illness with or without fever.
- the tip caps of the prefilled syringes of HAVRIX may contain dry natural latex rubber that may cause allergic reactions in latex-sensitive individuals.
- syncope (fainting) can occur in association with administration of injectable vaccines, including HAVRIX
- procedures should be in place to avoid falling injury and to restore cerebral perfusion following syncope
- For questions or concerns, consider consulting the DHA Immunization

3. Provide all patients (or their parent/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 hepatitis A vaccine intramuscularly, preferably in the deltoid muscle or, alternatively, the anterolateral thigh can also be used. (Do not administer in the gluteal region) Use a 22–25 g needle. Administer the age-appropriate dose as follows: **0.5 mL for patients age 18 years and 1.0 mL for patients age 19 years and older**. Use a 22–25 gauge needle. Choose needle length appropriate to the patient's age and body mass: adult patients: 1–1½".

Provide a subsequent dose of hepatitis A vaccine to complete each patient's 2-dose schedule by observing a minimum interval of 6 months between the first and second doses.

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