DHA-IHD Updates to Adult Standing Orders

All standing orders (pediatric and adult) are no longer brand specific and needle length and injection site information has been added to each order. Also, latex-specific information has been added. In addition, the following updates have been made:

<table>
<thead>
<tr>
<th>VACCINE</th>
<th>2019</th>
<th>2020</th>
</tr>
</thead>
</table>
| Anthrax | | • Breastfeeding added to precautions  
| | | • Added latex info for BioThrax®  
| | | • Guillain-Barré Syndrome (GBS) deleted from precautions  
| | | • Added Anthrax vaccine pregnancy registry info/contact  
| | Procedure/indication included | • Procedure/indication updated to:  
| | age 18 years or older who live in communities, regions, or states where routine vaccination is recommended  
| | diagnosis of a clotting-factor disorder, such as hemophilia | • Age updated to ≥19 years who has not completed series and persons age > 40 at increased risk  
| | | • Pregnant and those with  
| | | • Altered immunosuppression  
| | | • Occupational exposure  
| | | • Incarceration or homelessness  
| | | • In settings such as group homes, nonresidential day care for developmentally disabled  
| | | • Deleted diagnosis of a clotting-factor disorder, such as hemophilia as indication  
| | | • Latex info added for HAVRIX® and VAQTA®  
| | | • Added dosing schedule for VAQTA®  
| HepA | Procedure/Indications updated and added more details and travel to country with high endemicity of HBV, HIV infection, chronic liver disease, diabetes, use of injectable street drugs, person with exposure to STDs  
| | | • Added dosing schedule for Recombivax HB® and Heplisav-B  
| | | • Procedure/indications added – end stage renal disease, hemodialysis, HIV infection, diabetes  
| | | • Latex info added for TWINRIX®  
| | | • Updated dosing schedule and added info for the interchangeability of TWINRIX® and single antigen HepA and B vaccines  
| Hib | | New for 2020  
| HPV | Dosing schedule | Dosing schedule updated to:  
| | • Provide 9vHPV vaccine in a 3-dose schedule at 0, 2, and 6 calendar months for all males and females aged | • Age 15-26 initial vaccination and 9-26 with impaired immunity  
| | | • Updated to - 3 dose series at 0, 2, and 6 months (minimum interval of 4 weeks between dose 1 and 2, 12 weeks between 2-3 dose, and
### MeaslesMumpsRubella

<table>
<thead>
<tr>
<th>Procedure/Indication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify patients 18 years of age and older in need of vaccination against measles, mumps, and rubella</td>
</tr>
</tbody>
</table>

### Procedure/Indication updated with clearer definition of who needs 2 doses
- Lack of documentation of 2 doses, positive titer or born before 1957 (excludes HC workers) and those who have history of 2 doses but are at increased risk during mumps outbreak
- Added possible interference of TB skin test to precautions

### Meningococcal ACWY

<table>
<thead>
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<tbody>
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<td>age 18 years and anticipated first-year college student living in a residence hall and unvaccinated</td>
</tr>
</tbody>
</table>

### Dosing schedule
- 2 dose for high risk patients 24 months and older and routine booster for teens ages 16-18 who did not receive initial Menveo dose at age 11-12, and a 2nd dose for those ages 18-55 is not covered in this SO

### Procedure/Indication updated to:
- age 19-21 years and anticipated first-year college student living in a residence hall and last vaccinated before age 16 years of age
- Added HIV infection
- Dosing schedule updated to:
  - Added booster every 5 years for travelers or residents of endemic area, during outbreak, or occupational exposure
  - Added 2 dose and booster every 5 years for immunocompromised, asplenia including sickle cell
  - Added that standard of care/ACIP recommends MenACWY for 56 and older at increased risk even though package insert indicates through age 55
<table>
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<tr>
<th>Vaccine</th>
<th>Updates</th>
</tr>
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</table>
| **MenB** | • Procedure/indication added persons 18-23 years of age who are not at increased risk who want protection against MenB  
• Added dosing schedule for Trumemba® |
| **PCV13/PPSV23** | • Procedure/indication updated to include:  
• organ or bone marrow transplant for procedure for PPSV23 (for 19-64 yr olds)  
• Updated dosing for 65 and older and PCV13 to 1 time dose based on shared clinical decision  
• Updated dosing charts for PCV13 and PPSV23 based on age, risk factors, and shared clinical decisions for ages 19-64 and 65 and older |
| **Rabies** | • N/A |
| **Td/Tdap** | • Procedure/indication updated and include:  
• pregnant women who have not received Tdap during current pregnancy  
• Dosing updated to  
• Booster dose every 10 years of either Td or Tdap  
• Pregnant women should receive one dose of Tdap at each pregnancy during 27-36 weeks gestation  
• One time dose of Tdap in place of routine Td booster which is routinely given at the 11-12 years of age. All other booster doses should be completed with a Td vaccine at 10 year intervals  
• Tdap vaccine with every pregnancy (between 27-36 weeks gestation) is not covered under this standing order |
| **Typhoid** | • Precaution updated and added - oral typhoid vaccine should not be given within 3 days (before or after) of an antimicrobial agent  
• Dosing schedule includes both Typhim Vi® and Vivotif® |
| **Varicella** | • Updated precaution and added  
• TB skin testing  
• use of aspirin or aspirin containing products |
| **Yellow Fever** | • Deleted precaution - individuals with a history of allergic reactions to eggs, chickens, and gelatin  
• Added precaution - asymptomatic HIV infection with CD4 T lymphocyte values 200-499 mm³  
• Added note (recommendation) to separate MMR and YF vaccines at least 30 days apart |
| **Zoster** | • Added precaution that an acute episode of herpes zoster - RZV is not a treatment for herpes zoster or post-herpetic neuralgia |