DHA-IHD Updates to Pediatric Standing Orders

VACCINE	2020	2022
Influenza	• Not included in 2020	• Added pediatric standing order for Influenza
Pre Exposure Prophylaxis (PrEP) Rabies Vaccine	• Not included in 2020	• Added pediatric standing order for Pre-Exposure Prophylaxis (PrEP) Rabies Vaccine
Tick borne Encephalitis	• Not Included in 2020	• Added pediatric standing order for Tick-borne Encephalitis

DHA-IHD Updates to Adult Standing Orders

VACCINE	2020	2022
Influenza	• Not Included in 2020	• Added adult standing order for Influenza

PCV13/PPSV23	• **Procedure**
	  • Identify persons in need of vaccination with pneumococcal conjugate vaccine (PCV13) based on the following criteria:
	  • Identify persons in need of vaccination with pneumococcal polysaccharide vaccine (PPSV23)
	• #3. Screen all patients for contraindications and precautions to PCV13 or PPSV23 vaccine
	• Table 2. Routine Vaccination for all Adults ages 65 years and older
	• Table 3. Risk-based Vaccination schedule for Adults ages 19 years and older
		• **Procedure** updated to:
		  • Identify individuals in need of vaccination with pneumococcal conjugate vaccine (PCV13, PCV15, or PCV20) or pneumococcal polysaccharide vaccine (PPSV23) based on the following criteria
		• 2. Using DD Form 3111, screen all patients for contraindications and precautions to pneumococcal vaccines
		• Table 2 and 3 updated to Table 1: Use of Pneumococcal Vaccines in PCV naïve Adults ≥19 years of age
		  • Option 1: PCV13&PPSV23 **OR** Option 2: PCV20 or PCV15 & PPSV23
		• All Military Treatment Facilities (MTFs) and clinics should immediately add PCV15 and/or PCV20 to their formularies, and begin the transition from administering PCV13/PPSV23 to administering PCV20 or PCV15/PPSV23 to adults. Facilities who do not yet have PCV15 and PCV20 in stock may continue to follow previous recommendations until new vaccines are received.

Pre Exposure Prophylaxis (PrEP) Rabies Vaccine	• **Procedure**
	  • Identify individuals (all ages from birth to adult) in need of the pre-exposure prophylaxis rabies vaccine based on the following criteria:
	  • Travelers spending a month or longer in an endemic area (especially rural)
	  • Frequent risk persons such as veterinarians and their staff, animal handlers, rabies researchers, laboratory staff, spelunkers, or animal control and wildlife officers in areas where rabies is enzootic/epizootic
	  • Individuals in need of a booster dose for ongoing protection (e.g., when a rabies titer is non-protective)
	• #4 Provide vaccine as follows:
	  • Rabies vaccine (Imovax®, RabAvert®) for pre-exposure prophylaxis consists of a 3-dose series at 0, 7, and 21-28 days
	  • Administer 1mL intramuscularly in the deltoid muscle for adult
		• **Procedure** updated to:
		  • Identify individuals of any age (birth to adult) in need of vaccination with pre-exposure prophylaxis (PrEP) rabies vaccine based on one or more risk categories below (see Table 1 for expanded guidance):
		  • **Risk category 1 (highest):** People who work with live or concentrated rabies virus in laboratories.
		  • **Risk category 2:** People who frequently handle or have contact with bats, enter high-density bat environments like caves, or perform animal necropsies.
		  • **Risk category 3**: People who interact (or are at risk to interact) with mammals other than bats that could be rabid, for a period longer than three years after they receive PrEP. This can include:
		  • Veterinarians, veterinary technicians, and animal control officers (and their students/trainees); wildlife biologists, rehabilitators, trappers; and spelunkers (cave explorers).
		  • Travelers to regions outside the United States where canine rabies virus variant (CRVV) or wildlife rabies virus variants (RVV) are endemic.

		• **Risk category 4:** Same as risk category 3, but for ≤ 3 years after receiving PrEP. • **Risk category 5 (lowest):** General U.S. population. • #4 Provide vaccine as follows (see Table 1 and Table 2) updated to: • Rabies vaccine (Imovax®, RabAvert®) for pre-exposure prophylaxis consists of a **2-dose primary** series given intramuscularly (IM) at 0 and 7 days. Both vaccines are supplied by the manufacturer in a pre-packaged single-dose (1mL) kit. • **Administer booster doses** based on risk category and titer level. For Risk Category 3, patients may elect to receive a booster dose between **21 days and 3 years** after the primary series in lieu of a one-time titer check. • Do not start PrEP if series cannot be completed before travel. • **Added** Table 1 ACIP Rabies Pre-Exposure Prophylaxis (PreP) Recommendations • **Added** Children and Adolescent (birth – 18 years) IM Needle Length and Injection Site Guidelines
Tick borne Encephalitis		• New Standing Order
Zoster	• **Procedure** • Identify adults ≥50 years of age in need of vaccination against shingles. • ***Note: SHINGRIX® (RZV) is preferred over ZOSTAVAX® (ZVL). ACIP recommends patients previously vaccinated with ZVL receive RZV, observing a minimum interval of ≥8 weeks between ZVL and RZV doses*** • #2. Screen all patients for contraindications and precautions to RZV • #2 Precautions include: Pregnancy and breastfeeding: no available data. Consider delaying vaccination with RZV in such circumstances • #4. Provide vaccine as follows: • RZV (SHINGRIX®) consists of a 2-dose series at 0 and 2-6 months. Administer 0.5mL intramuscularly in the deltoid muscle for adults • ***Note: In the event of an invalid dose, RZV should be administered 28 days after the invalid dose to reduce the burden of adverse reactions which occur with this vaccine***	• **Procedure Updated:** • Identify adults ≥50 years of age in need of routine vaccination against shingles and adults ≥19 years of age and older who are or will be immunodeficient or immunosuppressed and would benefit from vaccination against shingles. • ***Updated Note: As of Nov 2020, ZOSTAVAX® (ZVL) is no longer available in the U.S. ACIP recommends patients previously vaccinated with ZVL receive SHINGRIX® (RZV), observing a minimum interval of ≥8 weeks between ZVL and RZV doses.*** • #2 updated: Screen all patients using DD Form 3111 for contraindications and precautions to RSZ • #3. Added Special Populations section that include pregnancy, breastfeeding and immunocompromised • #4. Provide vaccine as follows updated: • **Immunocompromised individuals** 19 years and older who would benefit from a shorter vaccination schedule may receive the 2nd dose of RZV 1-2 months after the 1st dose. • ***Updated Note: If the 2nd dose in the shorter vaccination schedule is given less than 28 days after the 1st, it must be repeated (the 4-day grace period does not apply). Administer a valid 2nd dose at least 28 days after the invalid dose.*** • Added RZV can be administered concomitantly at different anatomic sites with other adult vaccines, including COVID-19 vaccines. • The series does not need to be restarted if >6 months have elapsed since the 1st dose