

Standing Orders for Administering Hepatitis A Vaccine (Adult)

Purpose: To reduce morbidity and mortality from hepatitis A virus infection by vaccinating all persons 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 health care professionals working within their scope of practice may vaccinate patients who meet the criteria below.

Procedure:

1. Identify all persons ≥ 19 years of age in need of vaccination against hepatitis A virus (HAV) based on the following criteria:
 - Has not completed a hepatitis A vaccine (HepA) series (persons aged >40 years are at increased risk)
 - Anticipated international travel; see CDC Traveler's Health for updates
 - Pregnant and non-pregnant persons identified to be at risk for an infection or severe outcome from HAV:
 - altered immunocompetence (e.g., congenital, drug-induced, or acquired, such as HIV)
 - use of injection or non-injection illegal drugs
 - occupational risk (i.e., in a HAV research lab or with primates)
 - close contact with an international adoptee during the first 60 days after the arrival of the adoptee in the United States
 - males who have sex with other males (MSM)
 - incarceration or homelessness
 - chronic liver disease (e.g., hepatitis B or C, cirrhosis, fatty or alcoholic liver disease, autoimmune hepatitis, or ALT/AST levels persistently greater than twice the upper limit of normal)
 - In settings providing services for at-risk persons as defined above, such as group homes and nonresidential day care facilities for developmentally disabled persons
 - At-risk persons (as defined above) during a hepatitis A outbreak
 - Unvaccinated persons possibly exposed to HAV within the last two weeks
 - Any other adult who wants to be protected from HAV
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 HepA or to 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® and VAQTA®, and the vials of VAQTA®, contain natural rubber latex and may cause allergic reactions in latex sensitive individuals. The vials of HAVRIX® do not contain latex
- Syncope (fainting) can occur in association with administration of injectable vaccines. Procedures should be in place to avoid a falling injury (e.g. 15 minute observation after administration) and to restore cerebral perfusion following syncope
- For questions or concerns, consider consulting the DHA Immunization Healthcare Division at (877) 438-8222, Option 1 or DSN 761-4245

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.

4. Provide vaccine as follows:

HepA consists of a 2-dose series (HAVRIX®: 0, 6-12 months; VAQTA®: 0, 6-18 months). Administer 1mL intramuscularly in the deltoid muscle for adults.

Note: persons 12 months – 18 years of age receive a 0.5mL dose; persons 19 years of age and older receive a 1mL dose. Please see the appropriate standing order for administration of HepA to pediatric patients for details

Needle Length and Injection Site of IM Injections for Adults		
Use a 22 – 25 gauge needle. Choose needle gauge and length appropriate to administration route and the patient’s age and body mass.		
Age Group	Needle Length	Injection Site
Men and Women (<130 lbs)	1 inch [†]	Deltoid Muscle of Arm
Men and Women (130-152 lbs)	1 inch	
Men (152-260 lbs)	1-1.5 inches	
Women (152-200 lbs)		
Men (> 260 lbs)	1.5 inches	
Women (>200 lbs)		

Adapted from General Best Practice Guidelines for Immunization: Vaccine Administration <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.html>

[†] Some experts recommend a 5/8 inch needle for men and women who weigh <130 lbs, skin must be stretched tightly (do not bunch subcutaneous tissue)

5. Document all immunizations administered in the patient's electronic health record and the appropriate immunization tracking system. 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 (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