

Using Standing Orders for Administering Vaccines: What You Should Know

The use of standing orders for vaccination facilitates the delivery of immunization services to patients in clinics, hospitals, and community settings.

Standing orders have been shown to increase vaccination coverage rates.

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Go to www.immunize.org/standing-orders for the most current versions of sample standing orders

FOOTNOTE

¹ The Task Force was established in 1996 by the U.S. Department of Health and Human Services to identify population health interventions that are scientifically proven to save lives, increase lifespans, and improve quality of life. The Task Force produces recommendations (and identifies evidence gaps) to help inform the decision making of federal, state, and local health departments, other government agencies, communities, healthcare providers, employers, schools, and research organizations. For more information, see www.thecommunityguide.org/index.html.

What are standing orders?

Standing orders authorize nurses, pharmacists, and other appropriately trained healthcare personnel, where allowed by state law, to assess a patient's immunization status and administer vaccinations according to a protocol approved by an institution, physician, or other authorized practitioner. The standing orders work by enabling assessment and vaccination of the patient without the need for clinician examination or direct order from the attending provider at the time of the interaction. Standing orders can be established for the administration of one or more specific vaccines to a broad or narrow set of patients in healthcare settings such as clinics, hospitals, pharmacies, and long-term care facilities.

Who recommends standing orders for vaccination?

The Community Preventive Services Task Force (Task Force): The Task Force¹ recommends standing orders for vaccinations based on strong evidence of effectiveness in improving vaccination rates:

1. in adults and children,
2. when used alone or when combined with additional interventions, and
3. across a range of settings and populations.

Read the full Task Force Finding and Rationale Statement at www.thecommunityguide.org/vaccines/standingorders.html

The Centers for Disease Control and Prevention (CDC): CDC's Advisory Committee on Immunization Practices (ACIP) specifically recommends standing orders for influenza and pneumococcal vaccinations and several other vaccines (e.g., hepatitis B, varicella). See *Use of Standing Orders Programs to Increase Adult Vaccination Rates: Recommendations of the ACIP*. *MMWR* 2000;49 (No. RR-1) at www.cdc.gov/mmwr/preview/mmwrhtml/rr4901a2.htm.

What are the elements of a standing order?

A comprehensive standing order should include the following elements:

1. who is targeted to receive the vaccine;
2. how to determine if a patient needs or should receive a particular vaccination (e.g., indications, contraindications, and precautions);
3. procedures for administering the vaccine (e.g., vaccine name, schedule for vaccination, appropriate needle size, vaccine dosage, route of administration);

4. provision of any federally required information (e.g., Vaccine Information Statement);
5. how to document vaccination in the patient record;
6. a protocol for the management of any medical emergency related to the administration of the vaccine; and
7. how to report possible adverse events occurring after vaccination.

Who is authorized to administer vaccines under standing orders?

Each of the 50 states separately regulates the practice of medicine, nursing, pharmacy, and other health-related practitioners. For further information about who can carry out standing orders in your state, contact your state immunization program or the appropriate state body (e.g., state board of medical/nursing/pharmacy practice).

Who is authorized to sign the standing order?

In general, standing orders are approved by an institution, physician, or authorized practitioner. State law or regulatory agency might authorize other healthcare professionals to sign standing orders.

What should be done with the standing orders after they have been signed?

Signed standing orders should be kept with all other signed medical procedures and protocols that are operational in one's clinic setting. A copy should also be available for clinic staff who operate under those standing orders.

Do standing orders need to be renewed (e.g., yearly)?

Generally, standing orders will include an implementation date as well as an expiration date. Periodic review of standing orders is important, because vaccine recommendations may change over time.

Where can I find sample standing orders?

The Immunization Action Coalition has developed templates of standing orders for vaccines that are routinely recommended to children and adults. They are updated as needed and reviewed for technical accuracy by immunization experts at CDC. The most current versions can be accessed by going to www.immunize.org/standing-orders.