

Standing Order for Administering Anthrax Vaccine - Adults

Purpose: To reduce morbidity and mortality from anthrax by vaccinating adults who meet the criteria established by the Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP) and the Department of Defense (DoD).

Policy: Under these standing orders authorized healthcare professionals, where allowed by Service regulation or instruction, may vaccinate personnel who meet any of the criteria below.

Procedure:

1. Identify all adults 18 to 65 years in need of vaccination against anthrax based on the following criteria:
 - a. Vaccination is required for individuals as indicated per COCOM requirements
 - b. Vaccination is voluntary for individuals who have received at least one previous dose of vaccine
 - c. As indicated for occupational exposure to *Bacillus Anthracis* in the laboratory
2. Screen all patients for contraindications and precautions to the anthrax vaccine:
 - a. **Contraindications:** a history of a serious reaction or anaphylaxis after a previous dose or to any vaccine component as noted in the package insert. Women who may be pregnant and individuals with a history of anthrax disease should not be vaccinated.

Precautions: Individuals with a history of hypersensitivity reactions following vaccination or those with latex sensitivity. Individuals with a history of Guillain-Barré Syndrome (GBS) or any autoimmune neurologic disorder.
3. Provide all patients with a copy of the most current federal Vaccine Information Statement (VIS) and the DoD brochure titled *What You Need to Know About Anthrax Vaccine*.
4. Vaccine Administration. Administer 0.5 mL intramuscularly (22–25g, 1–1½" needle) in the deltoid muscle. Do NOT administer in the triceps. The 5-dose series should be administered at day 0, 4 weeks, 6 months, 12 months, and 18 months. Provide subsequent doses of vaccine by observing a minimum interval of 4 weeks between the first and second dose, 150 days between second and third dose and at least 180 days between third and fourth, and fourth and fifth doses. Do not restart the primary series for any reason and resume the series with administration of the next dose. Do NOT compress the minimum interval between anthrax vaccine doses.
5. Booster Requirements. If it has been ≥1year since completion of primary series, provide a booster dose for those who remain at risk of anthrax exposure or to those individuals who voluntarily request ongoing boosters.
6. Document immunizations for all personnel in a Services' Immunizations Tracking System (i.e. MEDPROS, ASIMS, and MRRS). Required immunization information includes: the name of the vaccine, the date vaccine was administered, the manufacturer, lot number, the dosage, VIS version date and the name of the person administering the vaccine. If vaccine was not given, record the reason for non-receipt of the vaccine e.g., medical contraindication, patient refusal etc.
7. Be prepared to manage a medical emergency related to the administration of vaccine by having a written emergency medical protocol available, as well as equipment and medications.
8. Report all rare or unexplained adverse reactions to the federal Vaccine Adverse Event Reporting System (VAERS) at www.vaers.hhs.gov or by calling (800) 822-7967.
9. Refer all women who were inadvertently vaccinated while pregnant to the BioThrax (Anthrax) Vaccine in Pregnancy Registry via email at nhrc-VaccineRegistry@med.navy.mil or by calling (619) 553-9255.

10. This policy and procedure shall remain in effect for all patients of the _____ clinic until rescinded and/or upon a change in medical director, whichever is earlier.

Medical Director's signature: _____ Effective date: _____

Printed Name and Title: _____