Standing Order for Administering Influenza Vaccine
Northern & Southern Hemisphere (Adult)

Purpose: To reduce morbidity and mortality from disease caused by influenza virus by vaccinating all individuals 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 this standing order, eligible healthcare professionals working within their scope of practice may vaccinate patients who meet the criteria below.

Procedure:

1. Identify individuals aged ≥ 18 years during influenza season (Northern Hemisphere: Oct - May; Southern Hemisphere: Apr - Sep) who do not have a documented dose of the appropriate influenza vaccine during the current season, or who are unsure of their vaccination status.

2. Using DHA Form 116, screen all patients for contraindications and precautions to influenza vaccine:

Contraindications (IIV, aIIV, ccIIV, RIV):

- History of a severe allergic reaction (e.g., anaphylaxis) or diagnosed allergy to a previous dose or component of any influenza vaccine is a contraindication to that same influenza vaccine type/ platform (e.g., egg-based [IIV, aIIV], cell culture-based [ccIIV], recombinant [RIV], or live attenuated [LAIV]). However, per ACIP recommendations other flu vaccine platforms may be considered with appropriate precautions.

Precautions (IIV, aIIV, ccIIV, RIV):

- Moderate or severe acute illness with or without fever.
- History of Guillain-Barré syndrome within 6 weeks of receipt of any influenza vaccine.
- History of a severe allergic reaction to a previous dose of one type of influenza vaccine is a precaution to use of the others.
- Syncope (fainting) can occur in association with administration of injectable vaccines. Have procedures in place to avoid a falling injury (e.g., 15-minute observation after administration) and to restore cerebral perfusion.

Contraindications (LAIV):

- Individuals ≥ 50 years of age.
- Pregnancy in any trimester.
- History of a severe allergic reaction (e.g., anaphylaxis) to any component of LAIV or to a prior dose of any influenza vaccine.
- Immunocompromise due to any cause (e.g., HIV, functional or anatomic asplenia, an active CSF shunt, cranial CSF leak, or cochlear implant).
- Close contacts and caregivers of severely immunosuppressed individuals who require a protective environment.
- Receipt of influenza antiviral medication within the last 48 hours (oseltamivir and zanamivir), last 5 days (peramivir), or last 17 days (baloxavir). Individuals who receive influenza antiviral medication

within 2 weeks after receipt of LAIV should be revaccinated with an age appropriate IIV or RIV.

Precautions (LAIV):

- Moderate or severe acute illness with or without fever.
- History of Guillain-Barré syndrome within 6 weeks of receipt of any influenza vaccine.
- Asthma in persons aged ≥ 5 years.
- Other underlying medical conditions that might predispose to complications after wild-type influenza infection (e.g., chronic pulmonary, cardiovascular [except isolated hypertension], renal, hepatic, neurologic, hematologic, or metabolic disorders [including diabetes mellitus]).
- For information on vaccine components, refer to the vaccine-specific package insert and The CDC Pink Book Appendix B.
- For questions or concerns, consider consulting the DHA Immunization Healthcare Support Center 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:
   - Administer influenza vaccine according to Tables 1 & 2.
   - Administer live influenza vaccine according to the package insert. Active inhalation (e.g., sniffing) is not required during administration.
   - Individuals may receive both Northern and Southern Hemisphere formulations if they will be present for ≥ 14 days during that hemisphere's influenza season. Northern and Southern Hemisphere influenza vaccines should be separated by ≥ 28 days.

TABLE 1. IM Needle Length and Injection Site Guide

Use a 22 – 25-gauge needle. Choose needle gauge and length appropriate to the patient's age

Patient Age	Needle Length	Injection Site
Men and women (130 lbs)	5/8* - 1 inch (16-25 mm)	Deltoid muscle of arm†
Men and women (130-152 lbs)	1 inch (25 mm)	
Men (152-260 lbs)	1-1.5 inches (25-38 mm)	
Women (152-200 lbs)		
Men (260 lbs)	1.5 inches (38 mm)	
Women (200 lbs)		
Men and women, any weight	1 inch* - 1.5 inches (38 mm)	Anterolateral thigh

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

* If skin is stretched tightly and subcutaneous tissues are not bunched.

† Preferred site.

TABLE 2. Influenza Vaccines, 2023- 2024 Season (Adult)				
Vaccine (Abbreviation)	**Type**	**Patient Age**	**Dose**	**Route**
Afluria (IIV4)	Egg-based	6 – 35 months	0.25 mL	IM
		≥ 3 years	0.5 mL	
Fluad (aIIV4)	Adjuvanted, egg-based	≥ 65 years	0.5 mL	
Fluarix (IIV4)	Egg-based	≥ 6 months	0.5 mL	
FluBlok (RIV4)	Recombinant, serum-free medium	≥ 18 years	0.5 mL	
Flucelvax (ccIIV4)	Cell culture-based	≥ 6 months	0.5 mL	
FluLaval (IIV4)	Egg-based	≥ 6 months	0.5 mL	
Fluzone (IIV4)	Egg-based	≥ 6 months	0.5 mL	
Fluzone High-Dose (HD-IIV4)	Egg-based	≥ 65 years	0.7 mL	
Fluzone Southern Hemisphere (SH-IIV4)	Egg-based	≥ 6 months	0.5 mL	
FluMist	Live attenuated, egg-based	2 – 49 years	0.2 mL (0.1 mL/ nostril)	NAS

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, VIS date and the identification of the person administering the vaccine. If vaccine was not given, record the reason for non-receipt.

6. Observation: All individuals who receive any vaccine should be monitored as follows:
    - 30 minutes - individuals with:
        - History of an immediate allergic reaction of any severity to a vaccine or injectable medication/ therapy.
        - History of anaphylaxis due to any cause.
    - 15 minutes: all other individuals.

7. 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.

8. Adverse events occurring after administration of any vaccine should be reported to the Vaccine Adverse Event Reporting System (VAERS) online at https://vaers.hhs.gov. Additional information about VAERS is also available by telephone (800-822-7967).

9. This standing order 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